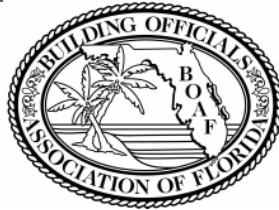


BOAF Application # \_\_\_\_\_  
(Assigned by BOAF Office) **Part II-D**

Date Received by BOAF \_\_\_\_\_

## **BUILDING INSPECTOR**

BCAIB Provider # 0001001



## **OJT CHECKLIST**

Training Program # 6568

### ONLY THE CURRENT EDITION OF THE BOAF OJT CHECKLIST WILL BEACCEPTED

Please check the website at <http://www.boaf.net/training.html> to be sure you are submitting the most current edition of the sheet. Sheets become effective on the revision date contained on the form. Training completed prior to that date may be submitted on the previous form.

This curriculum requires 35 hours (minimum) of FLORIDA BUILDING CODE classroom training, as approved by BOAF, or other pre-approved trainer. Certificates **MUST** be provided.

This curriculum also requires 250 hours (minimum) of properly documented On - Job - Training (OJT) with a **Florida Standard Licensed Building Inspector** Trainer as evidenced by this and other required forms, including the notarized trainers affidavit.

#### **A. Extensive training on all aspects of building systems should include both residential and commercial sections of the code as scripted by the following:**

1. Fundamentals
2. Footings, piers, foundation walls and slabs
3. Lintels, columns and beams
4. Soil conditions and excavations
5. Site plan verifications
6. Roof framing, roof sheathing and roof systems
7. Interior and exterior walls/framing, fire/draft stopping
8. Infiltration practices
9. Accessibility requirements
10. Egress requirements
11. Blocking and tie downs for mobile homes
12. Final building inspection

#### **B. Trainees must mark each item trained on, and initial in the spaces provided on the OJT checklist, when each training segment has been completed.**

#### **C. Trainees must also include the approximate percentage of the total number of hours spent in OJT for each segment.**



## **BUILDING INSPECTION OJT CHECKLIST**

My specific on job training has included instruction on the following items as indicated by “X” or a check mark.

### **General Site Conditions Checklist:**

- |  |  |
|--|--|
| <input type="checkbox"/> Permit, site plan, & plans posted | <input type="checkbox"/> Address posted              |
| <input type="checkbox"/> Lot corners identified            | <input type="checkbox"/> Required setbacks           |
| <input type="checkbox"/> Required site drainage            | <input type="checkbox"/> Sanitary facilities on site |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %** **Initials**

### **Footing Inspection Checklist:**

- |  |   |
|--|---|
| <input type="checkbox"/> Depth, width, steel per plan        | <input type="checkbox"/> Soil conditions - density report if required |
| <input type="checkbox"/> Bar laps & corners continuous       | <input type="checkbox"/> Dowels per plan                              |
| <input type="checkbox"/> Steps per code/engineering          | <input type="checkbox"/> Complies with site requirements              |
| <input type="checkbox"/> Reinforcing steel tied and elevated | <input type="checkbox"/> Spacing and distance from forms/earth        |
| <input type="checkbox"/> Flood FFE ok or in file if required | <input type="checkbox"/> Concrete placement equipment on hand         |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %** **Initials**

### **Mono Slab, Stem Wall and Slab Inspection Checklist:**

- |  |  |
|--|--|
| <input type="checkbox"/> All “Footing” items                       | <input type="checkbox"/> Vapor barrier, 6 mil./as required                     |
| <input type="checkbox"/> V.B. seams & penetrations sealed          | <input type="checkbox"/> Wire mesh lapped                                      |
| <input type="checkbox"/> Pipe sleeves through footings             | <input type="checkbox"/> All forms in place                                    |
| <input type="checkbox"/> Soil treatment certification              | <input type="checkbox"/> Water pipes protected                                 |
| <input type="checkbox"/> Column pads ready                         | <input type="checkbox"/> Foundation block alignment                            |
| <input type="checkbox"/> Block head and bedjoints                  | <input type="checkbox"/> Slab thickness  |
| <input type="checkbox"/> Vertical Poured cells clean               | <input type="checkbox"/> Vertical dowel lap adequate                           |
| <input type="checkbox"/> Complies with site requirements           | <input type="checkbox"/> Under slab electric & mechanical to code              |
| <input type="checkbox"/> Flood FFE OK or in file if required       | <input type="checkbox"/> In slab electric, mechanical and/or plumbing in place |
| <input type="checkbox"/> Reinforcing steel in place, tied, chaired | <input type="checkbox"/> Column, beam steel size, tied, spaced                 |
| <input type="checkbox"/> Special conditions (post tension, etc.)   | <input type="checkbox"/> Special equipment on hand                             |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %** **Initials**



**Lintel/tie-beam/beam/column Inspection Checklist:**

- |  |   |
|--|---|
| <input type="checkbox"/> Beams/column size per plan          | <input type="checkbox"/> Block alignment, head & bedjoints    |
| <input type="checkbox"/> Pre-cast lintels match plans        | <input type="checkbox"/> Lintel support                       |
| <input type="checkbox"/> Clean-outs per plan and clean       | <input type="checkbox"/> Steel continuous, tied, laps & hooks |
| <input type="checkbox"/> Concrete cover of steel as required | <input type="checkbox"/> Plumb. Vents & conduits as required  |
| <input type="checkbox"/> Window & Door openings per plan     | <input type="checkbox"/> Flood FFE ok or in file if requested |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %Initials**

**Framing/rough roof inspection Checklist:**

- |   |   |
|---|---|
| <input type="checkbox"/> Vertical down pours filled           | <input type="checkbox"/> Roof/sheathing system installed per requirements |
| <input type="checkbox"/> Roof product secured as required     | <input type="checkbox"/> Flashing on roof                                 |
| <input type="checkbox"/> Wall sheathing properly nailed       | <input type="checkbox"/> Trusses match engineering                        |
| <input type="checkbox"/> Truss bracing per plan/engineering   | <input type="checkbox"/> Truss connectors per plan/engineering            |
| <input type="checkbox"/> Diaphragm assemblies correct         | <input type="checkbox"/> Gable end per engineering                        |
| <input type="checkbox"/> Conventional roof framing per plan   | <input type="checkbox"/> Attic venting per plan /code                     |
| <input type="checkbox"/> Truss alignment                      | <input type="checkbox"/> Truss designed for load                          |
| <input type="checkbox"/> Access through roof system           | <input type="checkbox"/> Window & door attachments                        |
| <input type="checkbox"/> Bearing wall construction per plan   | <input type="checkbox"/> Non bearing walls                                |
| <input type="checkbox"/> Continuous path for uplift           | <input type="checkbox"/> Shear walls per plan                             |
| <input type="checkbox"/> Fasteners & connectors per plan      | <input type="checkbox"/> Frame floor system per engineering/plan          |
| <input type="checkbox"/> Stairs per code/plan                 | <input type="checkbox"/> Guard-railing per code                           |
| <input type="checkbox"/> Fireplace per plan/code              | <input type="checkbox"/> Chimney built to plan/code                       |
| <input type="checkbox"/> Fire/ draft stopping to code         | <input type="checkbox"/> Areas of refuse addressed                        |
| <input type="checkbox"/> Windows and exterior doors installed | <input type="checkbox"/> Safety glazing where required                    |
| <input type="checkbox"/> Draft stopping per code              | <input type="checkbox"/> Vapor barrier in place                           |
| <input type="checkbox"/> Rated walls per plan/code            | <input type="checkbox"/> Rated frames per code                            |
| <input type="checkbox"/> Egress requirements met              | <input type="checkbox"/> Accessibility addressed per code                 |
| <input type="checkbox"/> Ceiling construction per plan/code   | <input type="checkbox"/> Exterior components and cladding                 |
| <input type="checkbox"/> Notching and boring per code         | <input type="checkbox"/> Interior glazing in fire rated assemblies        |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %Initials**

**Rough Insulation Inspection OJT Checklist:**

- |  |   |
|--|---|
| <input type="checkbox"/> All "rough" inspections approved  | <input type="checkbox"/> Exterior envelope walls insulated            |
| <input type="checkbox"/> Infiltration caulking complete    | <input type="checkbox"/> Inaccessible ceiling batted                  |
| <input type="checkbox"/> Dams, baffles, & gauges installed | <input type="checkbox"/> Weather protected                            |
| <input type="checkbox"/> R-value matches plan              | <input type="checkbox"/> Holes in walls & floors sealed               |
| <input type="checkbox"/> Access for "blow-in"              | <input type="checkbox"/> Separation walls, etc. insulated as required |

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %Initials**

BOAF Application # \_\_\_\_\_ Date Received by BOAF  
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**Final Insulation Inspection (for “blown” insulation) OJT Checklist:**

- Depth matches R-value
- Attic accessible
- Insulation certificate complete
- Energy code compliance

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %Initials**

**Final Building Inspection OJT Checklist:**

- Site work & grade as required
- Weather & rodent proofed
- All electrical complete
- All means of egress ok
- Insulation & infiltration ok
- All “fire” requirements met
- Fireplace(s) meet all codes
- Safety glazing where required
- Completed per plans as relate to code
- Compliance to Termite Sections
- All plumbing complete
- All mechanical complete
- Walls & ceilings covered
- Complies with Accessibility Code
- Garage door meets wind load region
- All stairs to code
- Guard rails to code
- Water & sewer operational

**Approximate percent of total training hours spent on this segment \_\_\_\_\_ %Initials**

**Final Roof Inspection OJT Checklist:**

- All flashing in place
- Vents installed per code
- Final roof product in place
- Water shed from foundation

**Approximate percent of total training hours spent on this segment %Initials \_\_\_\_\_**

**Total Hours on All segments = \_\_\_\_\_ hours**

Trainee and Trainer(s) should sign this form after all segments of OJT Training has been completed. Include all Trainers that have trained on the hours shown on the Checklist.

By affixing our signatures and BCAIB (BN/PX) numbers below, we affirm and attest the above specific areas and hours of Building Inspection Training have been successfully completed.

_____ Trainee		____/____/____ Date Completed		_____ BCAIB#
_____ Building Trainer BCAIB# _____	____/____/____ Date Completed	_____ Building Trainer BCAIB # _____	____/____/____ Date Completed	
_____ Building Trainer BCAIB # _____	____/____/____ Date Completed	_____ Building Trainer BCAIB # _____	____/____/____ Date Completed	