

PERMIT # _____

LOT: _____

BLOCK: _____

FRAMING CHECKLIST

Instructions: Builder or Builder's representative checks boxes marked 'B', Building Inspector checks boxes marked 'I'. Responsible Person in Charge of Work signs, initials and dates in spaces provided. Building Inspector initials and dates in spaces provided.

NOTE: ALL ITEMS SHOULD BE AS SHOWN ON THE PLANS OR AS REQUIRED BY CODE.

A. BASEMENT OR CRAWL SPACE

- 1. ANCHORAGE:**
- | | | | | | | | |
|----------------------------------|--|---|--|---|--|--|--|
| <input type="checkbox"/> BOLTS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 2. SILL PLATES: | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 3. BEAM POCKETS: | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | 4. COLUMNS: | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> SPACING | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SIZE | <input type="checkbox"/> GRADE, SPECIES | <input type="checkbox"/> BEARING/SHIMS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SIZED PER PLAN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> STRAPS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SPACING (PER MANUFACTURER'S SPECS) | <input type="checkbox"/> TREATMENT | <input type="checkbox"/> TERMITE PROTECTION OR CLEARANCE | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> ATTACHMENT/PLATES | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> SIZE | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SILL SEALER | <input type="checkbox"/> LAPS | <input type="checkbox"/> PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SPACING/LOCATION | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| | | <input type="checkbox"/> PROPER TREATMENT OVER FOUNDATION OPENINGS (BEARING OF JOIST) | <input type="checkbox"/> TERMITE PROTECTION | | | <input type="checkbox"/> PAINT/COATING | |

B. FLOOR FRAMING AND FLOORING

- 1. BOX OR RIM JOIST, OR PERIMETER BAND JOIST:**
- | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|---|--|--|
| <input type="checkbox"/> 1 ST | <input type="checkbox"/> 2 ND | <input type="checkbox"/> 3 RD | <input type="checkbox"/> 4 TH | <input type="checkbox"/> FLOOR | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> 1 ST | <input type="checkbox"/> 2 ND | <input type="checkbox"/> 3 RD | <input type="checkbox"/> 4 TH | <input type="checkbox"/> FLOOR | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> SIZE | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> GRADE, SPECIES | <input type="checkbox"/> SINGLE OR DOUBLE | <input type="checkbox"/> PRE-ENGINEERED PER MAN-FACTURER'S SPECS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> SIZED PER PLAN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> GRADE, SPECIES | <input type="checkbox"/> PRE-ENGINEERED COMPONENTS AS SPECIFIED | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> BEARING |
| <input type="checkbox"/> CANTILEVERS AS PER DESIGN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> NAILING | <input type="checkbox"/> ATTACHMENT SCHEDULE | <input type="checkbox"/> LOCATION AND RELATION TO THE PLAN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> BEARING | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> NAILING | <input type="checkbox"/> BRIDGING | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> CUTTING AND NOTCHING (AS PER CODE) |
| | | <input type="checkbox"/> BEARING | <input type="checkbox"/> BEARING | | | <input type="checkbox"/> POINT LOADS - SUPPORTED AS PER PLAN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> HEADERS | <input type="checkbox"/> SPAN HANGERS | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> FRAMED OPENINGS |

4. FLOORING, SHEATHING, OR DECKING:

<input type="checkbox"/> 1 ST	<input type="checkbox"/> 2 ND	<input type="checkbox"/> 3 RD	<input type="checkbox"/> 4 TH	<input type="checkbox"/> FLOOR
<input type="checkbox"/> MATERIAL	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> PANEL SPAN, THICKNESS	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> EDGE BLOCKING (IF REQUIRED)

5. STAIR ATTACHMENT:

<input type="checkbox"/> 1 ST	<input type="checkbox"/> 2 ND	<input type="checkbox"/> 3 RD	<input type="checkbox"/> 4 TH	<input type="checkbox"/> FLOOR
<input type="checkbox"/> BEARING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> NAILING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> BEARING

SPECIAL REQUIREMENTS

<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> GAPPING	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> LAYOUT	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

I hereby certify that I inspected this building using this checklist and it conforms to the released plans and to the requirements of the Uniform Construction Code, N.J.A.C. 5:23.

Responsible Person in Charge of Work: _____ Date: _____

Building Inspector
Initials: _____
Date: _____

PERMIT # _____

LOT: _____ BLOCK: _____

C. WALL FRAMING

1. EXTERIOR WALL FRAME:

	1 ST	2 ND	3 RD	4 TH	FLOOR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIZE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPACE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIES AND GRADE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CUTTING, NOTCHING AND BORING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEADER SIZES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JACK STUD BEARING
TOP PLATES					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NAILING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAPS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RAFTER TIES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HURRICANE STRAPS (AS REQUIRED)

2. INTERIOR LOAD-BEARING WALLS:

	1 ST	2 ND	3 RD	4 TH	FLOOR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIZE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPACE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAYOUT - SUPPORT BELOW PER CODE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIES AND GRADE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CUTTING, NOTCHING AND BORING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FIRE BLOCKING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEADER SIZES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JACK STUD BEARING
TOP PLATES					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NAILING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAPS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STRAPPING

3. INTERIOR NON-LOAD-BEARING WALLS:

	1 ST	2 ND	3 RD	4 TH	FLOOR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIZE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPACE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIES AND GRADE
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CUTTING, NOTCHING AND BORING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FIRE BLOCKING
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEADER SIZES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TOP PLATE NAILING

D. ROOF FRAMING

1. TRUSS ROOF FRAMING (AS PER DESIGN):

APPROVED DOCUMENTS WHICH SHOW:

<input type="checkbox"/>	<input type="checkbox"/>	LAYOUT PLANS
<input type="checkbox"/>	<input type="checkbox"/>	TRUSS MEMBERS
<input type="checkbox"/>	<input type="checkbox"/>	CONNECTION SCHEDULE
<input type="checkbox"/>	<input type="checkbox"/>	PERMANENT BRACING DETAILS
<input type="checkbox"/>	<input type="checkbox"/>	DORMERS/ROOF STRUCTURES ON MANUFACTURER'S DRAWINGS
<input type="checkbox"/>	<input type="checkbox"/>	EQUIPMENT/APPLANCES ON MANUFACTURER'S DRAWINGS

2. PERMANENT TRUSS-TO-TRUSS BRACING (AS PER DESIGN):

<input type="checkbox"/>	<input type="checkbox"/>	LAYOUT
<input type="checkbox"/>	<input type="checkbox"/>	SIZE
<input type="checkbox"/>	<input type="checkbox"/>	TYPE
<input type="checkbox"/>	<input type="checkbox"/>	NAILING
<input type="checkbox"/>	<input type="checkbox"/>	OVERLAP
<input type="checkbox"/>	<input type="checkbox"/>	TERMINATION
<input type="checkbox"/>	<input type="checkbox"/>	TRANSITION (I.E., CROSS) BRACING

4. SOLID SAWN ROOF FRAMING:

<input type="checkbox"/>	<input type="checkbox"/>	SIZE
<input type="checkbox"/>	<input type="checkbox"/>	GRADES, SPECIES
LAYOUT		
<input type="checkbox"/>	<input type="checkbox"/>	SPACING
<input type="checkbox"/>	<input type="checkbox"/>	SPAN
<input type="checkbox"/>	<input type="checkbox"/>	BEARING
<input type="checkbox"/>	<input type="checkbox"/>	FASTENING
<input type="checkbox"/>	<input type="checkbox"/>	DAMAGE CAUSED BY FASTENERS (RAFTERS NOT SPLIT BY TOENAILS)
<input type="checkbox"/>	<input type="checkbox"/>	CUTTING, NOTCHING, AND BORING
<input type="checkbox"/>	<input type="checkbox"/>	BRIDGING
<input type="checkbox"/>	<input type="checkbox"/>	RIDGE SIZE
<input type="checkbox"/>	<input type="checkbox"/>	HURRICANE TIES WHERE APPLICABLE

E. SHEATHING

1. SHEATHING - EXTERIOR WALLS:

MATERIAL

<input type="checkbox"/>	<input type="checkbox"/>	PANEL SPAN, THICKNESS
--------------------------	--------------------------	-----------------------

SPECIAL REQUIREMENTS

<input type="checkbox"/>	<input type="checkbox"/>	GAPING
<input type="checkbox"/>	<input type="checkbox"/>	LAYOUT
<input type="checkbox"/>	<input type="checkbox"/>	CORNER BRACING (IF REQUIRED)

2. SHEATHING - ROOF:

MATERIAL

<input type="checkbox"/>	<input type="checkbox"/>	PANEL SPAN, THICKNESS
--------------------------	--------------------------	-----------------------

SPECIAL REQUIREMENTS

<input type="checkbox"/>	<input type="checkbox"/>	BLOCKING, EDGE (IF REQUIRED)
<input type="checkbox"/>	<input type="checkbox"/>	CLIPS (IF REQUIRED)
<input type="checkbox"/>	<input type="checkbox"/>	GAPING
<input type="checkbox"/>	<input type="checkbox"/>	LAYOUT

SHEATHING, FR - ROOF

<input type="checkbox"/>	<input type="checkbox"/>	FOUR FEET FROM FIREWALL
<input type="checkbox"/>	<input type="checkbox"/>	NONCORROSIVE FASTENERS

Initials: Resp. Person in Charge of Work _____

Building Inspector _____