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INSPECTION DIVISION

Foundation Repair

Date: _____

Permit #: _____

Owner's Name: _____

Site Address: _____

Contractor Name: _____

Contractor's Signature: _____

Check all that apply

- 1. Wet walls/No leakage on floor (NO DISPLACEMENT)
- 2. Water leakage at wall/floor joint
- 3. Water leakage above wall base
- 4. Water seepage through floor slab
- 5. High Water Table
- 6. Leaning or bowed walls/Wall deflection less than one inch (NO MOVEMENT)
- 7. Wall step cracks with no displacement
- 8. Leaning or bowed walls/Wall deflection less than one inch (SOME MOVEMENT)
- 9. Leaning or bowed walls/Wall deflection one inch or more (SIGNIFICANT MOVEMENT)
- 10. Walls sheared at base/Wall slide less than ½ inch
- 11. Wall sheared at base/Wall slide ½ inch or more
- 12. Dropped, settled or rotated footing
- 13. Poured concrete, brick or stone walls with water leakage (NO WALL DISPLACEMENT)
- 14. Poured concrete walls, leaning or bowed/Wall deflection less than 1 inch
- 15. Poured concrete walls, leaning or bowed/Wall deflection 1 inch or more
- 16. Brick walls leaning or bowed/Wall deflection less than 1 inch
- 17. Brick walls leaning or bowed/Wall deflection 1 inch or more

Engineering design specifications can be submitted in lieu of the "Best Management Standards for Foundation Repair" as proposed by WAFRP.

Describe the problem: _____

Describe solution: _____

