

Project Sponsor:_	
Project No.:	
Contractor:	
Division:	

STATE OF SOUTH CAROLINA STATE REVOLVING FUND (SRF) PROGRAM MONTHLY CONSTRUCTION INSPECTION REPORT

Inspection Month and Year: Scheduled Construction Complete (%):		Inspection No.:Actual Complete (%):	
Brief Description of Monthly	Construction Activity:		
Overall Project Performance (Deficiencies, Quality	of Construct	ion):
Comments and/or Recommen	dations:		
Change Order No.	Date Submitted to DHEC		Date Approved by DHEC
Subcontractors on Site		Construction Type	
Inspector's Signature			Date

Submit one report for each contract and include with the DHEC Form 3585, Draw Request Form. Do not submit daily log sheets with this report.

Submit to:

SCDHEC, Water Facilities Permitting Division, SRF Section, 2600 Bull Street, Columbia, SC 29201