## Site Inspection Format for Building Completion Certificate / Occupancy Certificate Low Risk Buildings

Name of Industrial Area	:
SPA Division Office	:
Plot Number	:
Name of Site Inspector	:
Assigned Date of Inspection	:
Actual Date of Inspection on Site	:

Sr.	Items	Details to be filled by the	Remarks
No.		assigned Site Inspector	
1	Name of allottee		
2	Plot number		
3	Plot area in sq.m.		
4	Date of Possession		
5	Whether plot boundary is as per		
	demarcation done by RO Office?		
6	Property Type (Shed, Gala, Plot		
	etc)		
7	Type of Industrial Use		
	*(Warehouse Godown & Industrial		*Please refer to Schedule - 1 of MIDC's Circular No.
	activities listed in B-1 & B-2 of		MIDC/CP/C01690/2016
	attached schedule -1 IT, BT & NT)		dated 29/06/2016
8	Approach Road Width in Meter		
	Approach Road 1		]
	Approach Road 2		1

Earl	Earlier approval details in case of extension to the existing building		
9	Earlier BCC/Approval letter no. &		
	date		
10	BUA as per earlier BCC/Approval		
	in sq.m.		
11	FSI Consumed as per earlier		
	BCC//Approval		
12	Whether the construction is		
	completed as per the approval		
	plan? (Yes/No)		
13	Any unauthorised construction		
	done in marginal open space?		
	(Yes/No)		
	If yes then provide details of the		
	same.		
14	Any construction demolished?		
	Plan approval is taken but not		
	constructed or demolished at the		
	time of BCC? (Yes/No)		

Con	struction Details	
15	Architects/Owners letter no. & date of application for BCC	
16	Structural Engineers Completion Certificate	

17	Plumbing Completion Certificate	
18	Approved building height in Meter	
19	Area of Construction	
	Building 1	
	Building 2	
	Total Extra Height Area (If any)	
	Excess Balcony Area (If any)	
20	Total BUA in sq.m.	
	(Total construction area completed	
1	as on date)	
21	Total FSI Consumed as on date	
22	Open spaces are as per standards	
	(Yes/No)	
23	Parking provided is as per	
	standards (Yes/No)	
24	Fire NOC obtained (Yes/No)	
25	List of Structures in marginal open	
	space & Built up Area	
26	Water Connection (Yes/No)	
	Consumer No.	
27	Sewage Connection (Yes/No)	
	Consumer No. ( if applicable)	
28	Whether septic tank /soak pit	
	drainage line is provided as per	
	approved plan? (Yes/No)	
29	Whether water storage tank is	
	provided as per approved plans?	
	(Yes/No)	
30	Whether rain water harvesting	
	system is installed? (Yes/No)	

Oth	Other Details	
31	Number of Tree plantation	
32	Whether Cross Drainage is	
	provided below the approach road?	
	(entrance to the plot)	
33	Whether NOC of water charges is	
	obtained?	
34	Details of compound wall	

Remarks:

Date: Place:

Signature

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Name & Designation of the Site Inspector