

CONDOMINIUM PLAT FIELD INSPECTION CHECKLIST

(This form is for internal inspection guidelines and not an all-inclusive list)

Condominium

Name: _____

Date of Initial Field Check: _____

Survey Crew: _____

Date of Second Field Check: _____

Survey Crew: _____

Date of Additional Check: _____

Survey Crew: _____

Field Check:

- ___ All monuments set & capped +/- 0.1
- ___ Center line monuments set in approved monument box ([Monument Box Requirements](#))
- ___ Data problems (discovered in field)
- ___ Overall ties (if warranted)
- ___ Any visible encroachments?
- ___ Encroachment fences... type of fence noted
- ___ Any visible easements not shown on map?
- ___ Set and found monuments conform to map
- ___ Building dimensions match plat map
- ___ Ties to buildings verified

- ___ **Field check approved**