



TEXAS DEPARTMENT OF LICENSING & REGULATION

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In-Plant Inspection – Summary of Units Inspected – Cover Page of Inspection Report

A. Summary Page _____ of _____ Inspection Date: _____
Manufacturer: _____ Manufacturer Reg. #IHM- _____
Inspector Name: _____ Inspector Reg. #IHI- _____
Inspection Agency: _____ TPIA Reg. #IHIA- _____

B. Date of Last TX Inspection: _____ Total # Units Inspected Today's Inspection = _____

1. Check if you witnessed tests: _____ # of inspections since tests last witnessed: _____
2. Check if manufacturer is on an increased frequency of inspections
3. Check if the manufacturer QC/QA inspectors are verifying energy compliance with approved energy compliance checklist
4. Check if you have any comments or concerns about the inspection (see Part E of form)
5. Check if Possible DRA Approval Error Attached
6. Check if the manufacturer has plans and QC manual approved to the 2021 I Codes if construction started after 7/01/24 for all areas except for energy requirements which should continue to be approved to the 2015 edition of the IECC.
7. Check if construction began before 7/01/24

C.	Unit ID Number	TX Decal or Insignia #	IF?	Station/Phase	Model # or Project Name/Plan Approval Date	# of Deviations	C?
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total # of Uncorrected Deviations Previous Inspection (Complete only on first page of summary & attach copy of deviation report):							
Total # of Uncorrected Deviations This Inspection (Complete only on first page of summary):							
Total # of Deviations This Inspection (Complete only on first page of summary):							

Use continuation sheet on page 2 of form if more space is needed.

D. DID YOU CLEAR UNCORRECTED DEVIATIONS FROM PREVIOUS INSPECTION – IF SO DOCUMENT ON FORM IHB 215.

Total units inspected for corrections from previous inspection = _____

E. Please list any comments or concerns that you have about the inspection (continued on page 2 of form)

(Continued on back)

In-Plant Inspection – Summary of Units Inspected – Cover Page of Inspection Report (continued)

A. Summary Page _____ **of** _____

Inspection Date: _____

Manufacturer Reg. #IHM- _____

C.

Unit ID Number	TX Decal or Insignia #	IF?	Station/Phase	Model # or Project Name/Plan Approval Date/States Inspected	# of Deviations	C?
(15)						
(20)						
(25)						
(30)						
(35)						

E. Please list any comments or concerns that you have about the inspection.
