

Address: \_\_\_\_\_ Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

**KITCHEN VENT / BATHROOM EXHAUST / CLOTHES DRYER/  
INSPECTION CHECKLIST**

YES NO N/A

**Domestic kitchen exhaust:**

- |       |       |       |   |
|-------|-------|-------|---|
| _____ | _____ | _____ | 1. Duct properly terminated outside.  |
| _____ | _____ | _____ | 2. Installation of microwave ovens must comply with code.   |
| _____ | _____ | _____ | 3. Makeup air provided as required per code.  |
| _____ | _____ | _____ | 4. Return plans to original location; sign and date permit card or leave correction notice with items listed. |

**Domestic clothes dryer exhaust:**

- |       |       |       |   |
|-------|-------|-------|---|
| _____ | _____ | _____ | 1. Dryer exhaust ducts shall terminate on the outside of building. The exhaust duct shall terminate Not less than 3' in any direction from openings into buildings. Exhaust ducts shall have a Backdraft damper. Termination shall not be screened. |
| _____ | _____ | _____ | 2. Combustion air provided for gas dryer.   |
| _____ | _____ | _____ | 3. Make-up air provided if dryer exhausts >200 cfm or is in closet.   |
| _____ | _____ | _____ | 4. Where a clothes dryer is not installed at the time of occupancy, the exhaust duct shall be capped at the Location of the future dryer.   |

**Bathroom Ventilation Rough:**

- |       |       |       |  |
|-------|-------|-------|--|
| _____ | _____ | _____ | 1. Bathrooms, water closet compartments and other similar rooms shall be provided with aggregate Glazing area in windows of not less than 3 square feet, one half of which must be operable. |
| _____ | _____ | _____ | b. Exception: the glazed area is shall not be required where artificial light and A local exhaust system is provided.  |
| _____ | _____ | _____ | c. The minimum local exhaust rates shall be determined in accordance with code. Exhaust from the space shall be exhausted directly to the outside and not recirculated.                      |
| _____ | _____ | _____ | 2. Return plans to original location, sign and date permit card or leave correction notice with items listed.  |

THESE GUIDELINES ARE NOT ALL INCLUSIVE. ADDITIONAL REQUIREMENTS IN THE FLORIDA BUILDING CODE MAY ALSO APPLY TO YOUR PROJECT. IF YOU NEED FURTHER ASSISTANCE, PLEASE CONSULT THE CURRENT BUILDING CODE. IF YOU HAVE ANY FURTHER QUESTIONS, PLEASE CONTACT THE CITY OF INVERNESS COMMUNITY DEVELOPMENT DEPARTMENT AT 352-726-3401 OR [DDS@INVERNESS.GOV](mailto:DDS@INVERNESS.GOV).