

CITY OF PRESCOTT (928)777-1356	TOWN OF PRESCOTT VALLEY (928)759-3050	TOWN OF DEWEY HUMBOLDT (928)632-7362	TOWN OF CHINO VALLEY (928)636-4427	YAVAPAI COUNTY (928)771-3193
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SPECIAL STRUCTURAL INSPECTIONS CERTIFICATE

TO BE COMPLETED BY ENGINEER / ARCHITECT RESPONSIBLE FOR SPECIAL INSPECTIONS

PERMIT #:	PROJECT NAME:	PROJECT ADDRESS:
PARCEL #:		
PROJECT OWNER / OWNERS AGENT:	MAILING ADDRESS:	PHONE #:
ENGINEER / ARCHITECT NAME:	MAILING ADDRESS:	PHONE #:

I hereby affirm that I am familiar with the design of this project and have been designated by the Owner / Owner's Agent as the Engineer / Architect responsible for implementing the Special Structural Inspections Program required by the Authority having Jurisdiction and the 2003 International Building Codes section 106.3.4.1 and chapter 17. I have determined that the types of work checked below require Special Structural inspection and that the individual(s) or firm(s) named below are qualified to perform the Special Inspections, understand and agree to inform the project owner, the contractor(s), and the Special Inspector(s) about all Special Inspection Program requirements and limitations, including that the Special Inspector(s) must be independent third-party individual(s) or firm(s) and shall not be the installing contractor(s).

(Seal, sign and date)

TYPES OF INSPECTIONS REQUIRED: (Check each type of inspection required by architect/engineer of record)
FOOTNOTES: ¹ EXTENT OF WORK INSPECTED; CONTINUOUS OR PERIODIC, FREQUENCY

- 1. CONCRETE and BOLTS INSTALLED IN CONCRETE :**
 Inspection Scope & schedule¹ _____
 Frequency of Sampling Materials _____
 Frequency of Testing _____

- 2. REINFORCING STEEL AND PRE-STRESSED STEEL TENDONS:**
 Inspection Scope & schedule¹ _____
 Method of testing _____

- 3. STRUCTURAL STEEL: RESISTING STEEL FRAMES, REINFORCING STEEL AND HIGH-STRENGTH BOLTING:**
 Inspection Scope & schedule¹ _____
 Types of non-destructive testing _____
 Frequency of Testing _____

- 4. STRUCTURAL MASONRY:**
 Inspection Scope & schedule¹ _____
 Frequency of Sampling Materials _____
 Frequency of Testing _____

- 5. SPRAYED ON FIREPROOFING:**
 Inspection Scope & schedule¹ _____
 Method of inspection _____
 Frequency of Sampling Materials _____
 Frequency of Testing _____

6. SPECIAL GRADING, EXCAVATION, FILLING, PILING, DRILLED PIERS AND CAISSONS:

Inspection Scope & schedule¹ _____

Method of Testing Soil Density _____

7. SPECIAL CASES:

Inspection Scope & schedule¹ _____

Method of Inspection _____

Other _____

SPECIAL INSPECTOR CERTIFICATION:

I hereby certify that I am qualified to perform the special inspection items marked above, that I will perform the special inspections at the appropriate times as scheduled by the contractor and that I will submit weekly and final reports.

SPECIAL INSPECTOR: _____ **DATE:** _____

NAME PRINTED _____

BUILDING OFFICIAL'S APPROVAL OF PROPOSAL OF SPECIAL INSPECTION:

BUILDING OFFICIAL: _____ **DATE:** _____

OWNER CERTIFICATION:

I hereby certify that I will employ the aforementioned Special Inspector to perform the inspections shown above.

OWNER/owner applicant: _____ **DATE:** _____

NAME PRINTED _____

NOTES: Special Inspection weekly reports must be submitted to the owner and to the Building Official within 5 working days of the last day of the week being reported to avoid Suspension of the Building Permit and possible Stop Work Order. A monthly summary letter is required for overall status including any outstanding items that require follow-up. The final special inspection approval letter(s) must be submitted before use or occupancy. Any variation to the special inspection proposal requires prior approval of the Building Official.