** Special Inspector Registration Form**

**Please Email Completed form with a copy of certifications to the Special Inspector Registration Inbox to complete the registration process:** **SIRegistration@ontarioca.gov**

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| **Job Address** |       | **Permit Number:**  |       |
| **Inspectors Name** |       |
| **Inspectors Address** |       |
| **Phone Number** |       |

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| --- | --- | --- | --- | --- |
| **Discipline** | **L.A COUNTY** | **L.A CITY** | **ICC** | **OTHER** |
| Concrete |[ ] [ ] [ ]        |
| Moment Resisting Frame |[ ] [ ] [ ]        |
| Welding |[ ] [ ] [ ]        |
| High Strength Bolting |[ ] [ ] [ ]        |
| Structural Masonry |[ ] [ ] [ ]        |
| Reinforced Gypsum Concrete |[ ] [ ] [ ]        |
| Insulating Concrete Fill |[ ] [ ] [ ]        |
| Sprayed on Fireproofing |[ ] [ ] [ ]        |
| Pilings, Drilled Piers, Caissons |[ ] [ ] [ ]        |
| Reinforcing and Pre-stressing Steel |[ ] [ ] [ ]        |
| Special Cases |[ ] [ ] [ ]        |

**I hereby certify that I am qualified by training and experience to perform the inspections for which I hold the above listed Special Inspectors licenses and will provide all certifications required by the City.**

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| **I will inspect and certify the following procedures:** |
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|       |

I will certify not only to the job conditions, but that they are in conformance with the approved plans. If at any time, progress occurs on the above-mentioned job relating to my area(s) of responsibility, without my knowledge or approval, I will stop the job’s progress immediately with notification in writing to the job superintendent and notify the Building Division of the situation. A record of my tests and/or inspections as agreed to above will be available upon request by the Building Division. Upon request, I will submit a complete package of testing and inspection results. A letter certifying satisfactory completion will be provided by me upon completion.

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Special Inspector Signature Date