



Town of Camp Verde

Phone: (928) 554-0050

Community Development
 473 S. Main Street, Suite 108
 Camp Verde, AZ 86322

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 # |
| FIRM NAME | EMAIL ADDRESS | FAX # |

| | |
|-----------------------|---|
| (Seal, sign and date) | <p>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 2018 International Building Code, Chapter 17. I have determined that the types of work checked below require Special Structural Inspection and the individuals(s) or firm(s) named below are qualified to perform the Special Inspections. I 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).</p> |
|-----------------------|---|

| Y | E | S | N | O | TYPES OF WORK REQUIRING SPECIAL STRUCTURAL INSPECTION (ATTACH SUPPLEMENT IF NECESSARY) | QUALIFIED SPECIAL INSPECTOR, INDIVIDUAL(S) OR FIRM(S) (ATTACH SUPPLEMENTAL IF NECESSARY) |
|---|---|---|---|---|---|---|
| | | | | | CONCRETE | |
| | | | | | BOLTS INTALLED IN CONCRETE | |
| | | | | | SPECIAL MOMENT-RESISTING CONCRETE FRAME | |
| | | | | | REINFORCING STEEL AND PRE-STRESSING STEEL TENDONS | |
| | | | | | STRUCTURAL WELDING | |
| | | | | | HIGH-STRENGTH BOLTING | |
| | | | | | STRUCTURAL MASONRY | |
| | | | | | EXPANSION/EPOXY ANCHORS | |
| | | | | | SOILS | |
| | | | | | COMPACTION | |
| | | | | | OTHER (PLEASE SPECIFY) | |

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:** _____

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.