

## Statement of Special Inspections

**Purpose:** The purpose of this form is to capture the statement of special inspections and all professional stamps.

**Instructions:** All information that pertains to the applicant must be completed on all pages of this form.

**Permit Numbers:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

This Statement of Special Inspections is submitted as a condition for permit issuance in accordance with the Construction Code. It includes a Schedule of Special Inspections applicable to this project as well as the name of the Special Inspections Engineer(s) of Record, and the identity of other agents such as testing laboratories or agencies intended to be retained for conducting these inspections or tests.

The Special Inspections Engineer of Record (SIER) shall keep records of specified inspections, and shall furnish inspection reports to the Chief Building Official, DOB Inspector or Third-Party Inspector, appropriate Registered Design Professionals (RDP), Owner and Contractor. All discrepancies shall be brought to the immediate attention of the Contractor and the Registered Design Professional in Responsible Charge for correction. If the discrepancies are not corrected, the discrepancies shall be brought to the attention of the Chief Building Official and appropriate RDP(s). Interim reports and an activity/incident log shall be made available to the DOB Inspector or Third-Party Inspector according to the DOB Special Inspections Manual.

All fees/costs related to the performance of Special Inspections shall be the responsibility of the Owner. Additionally, the undersigned (RDP or SIER) are only acknowledging that the items enumerated on the Schedule of Special Inspections are consistent with the required design elements, the applicable sections of the DCMR, and their area of expertise.

**General Contractor:** \_\_\_\_\_ **Company:** \_\_\_\_\_ **License #:** \_\_\_\_\_

**Owner or Owner's Agent:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**SECTION TO BE COMPLETED BY DOB STAFF ONLY**

**Accepted by DOB Building Official:**

\_\_\_\_\_

Full Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Title