

Special/Deputy Inspector 505 S. GAREY AVE.

POMONA, CA 91769

Name of Inspector:				
Contact Phone Number:		_ Laboratory/Shop Nam	ne:	
Supervisor/Employer:				
Mailing Address:				
Contact Phone Number:				
FIELDS CERTIFIED IN:				
Reinforced Concrete & Masonry	Certification #:		Expires:	
Masonry Only	Certification #:		Expires:	
Structural Steel	Certification #:		Expires:	
☐ Welding	Certification #:		Expires:	
ICC Certificate	Certification #:		Expires:	
Other	Certification #:		Expires:	
JOB ADDRESS TO BE INSPECTED IN	CITY:			
Inspections performing:				
Tract #: Permit Number:				
Length of Inspection:				
I certify that the information given above is correct and further state that I am a Certified Inspector capable of furnishing continuous inspection in the fields checked above in accordance with Section 306 (a) of the Uniform Building Code.				
Print Name		Signature	Date	
BUILDING DEPARTMENT USE ONLY				
Information Taken By:			Date:	



505 S. GAREY AVE. POMONA, CA 91769

To: Special Inspectors	
Subject: Special Inspector Report Forms	
In reviewing our Special Inspector Program, the Buildin modifications are in order concerning written reports.	g and Safety Division has noted that some
A major portion of the Special Inspector's is to complete should be prepared on a daily basis and may be submitted	
Special Inspector reports provide the necessary commun fessional, contractors, owners and the Building and Safe these reports, and the lack of sufficient detail in many of need to establish minimum levels of the report writing for	ty Division. Because of the critical importance of the reports we have received in the past, there is a
In an effort to improve the quality and consistency of repspection Report Forms (attached) that must be used on a forms have been designed to assist the Special Inspector information relative to the project being inspected. Alter has granted prior approval.	all projects within the City of Pomona. These new in documenting all the necessary
If you need any additional copies please call the Building Inspector, to obtain extra copies of Special Inspector for from the enclosed originals.	
If you have any questions regarding your duties and resp Building and Safety Division at (909) 620-2371 and ask t	
Project Name:	Permit Number :
Project Address:	City Insp Name:



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Duties and Responsibilities of the Special Inspectors

- 1. The Special Inspector must call into the Building and Safety Division 24 hours prior to arriving at the job location. (909) 620-2371. Waiver of this requirement is subject to the approval of the Building Official.
- 2. The Special Inspector shall observe the work assigned to be certain it conforms to the <u>City Approved</u> <u>Plans</u>. The approved plans shall be available when work is in progress. The Special Inspector shall not accept any deviation from approved plans unless the Building and Safety Division has approved the revision.
- 3. The Special Inspector shall furnish inspection reports on approved report forms (attached) to the Building and Safety Division, the Engineer or Architect of Record, and other designated persons in a timely manner. <u>All discrepancies</u> shall be brought to the immediate attention of the contractor for correction, then, if uncorrected to the proper design authority and to the Building and Safety Division.
- 4. Notify the Building and Safety Division, if any emergency arises and you are to be absent from the job while work is in progress, and then notify the person in responsible charge of work. Work requiring a Special Inspector must be stopped unless the owner has obtained an approved substitute Inspector, Licensed by this City.
- 5. The Special Inspector shall submit a Final Report (attached) to the Building and Safety Division, stating whether the work requiring special inspection was, to the best of their knowledge, in conformance with the approved plans and specifications and the applicable workmanship provision of this code.
- 6. Your presence on the job does not excuse the project from the other formal inspection made by the regular inspection force of the city. Concrete shall not be placed on any job until the City Building Inspector has granted the approval.

In clarifying the role of the Special Inspector, it is important to remember that the inspections you will perform are required in addition to the inspections performed by the City Building Inspectors. Therefore, you are not authorized to assume the role or responsibility of the City Building Inspectors, rather, you work closely and in harmony with them.

If you have any questions regarding in the performances of the duties and responsibilities, Please contact the Building and Safety Division at (909) 620-2371

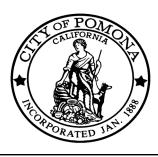
Note: Failure to comply with these policies and procedures may result in the revocation of your City of Pomona Special Inspectors License.



505 S. GAREY AVE. POMONA, CA 91769

Special Inspector's Certification of Compliance

To The Building Official:					
I hereby certify that the following portions of the work at the above address which required continuous inspection, and which I was employed to inspect, were inspected by me and comply with the provisions of the Building Code applicable thereto. Based upon approved plans, specifications, and the applicable workmanship provisions of the Uniform Building Code.					
	TYPE OF INSPECTION				
	Please Circle One				
Slump/cylinders	Rebar Placement	Tendon Placement			
Welding/Structural Steel	Concrete Placement	Shot Crete			
High-Strength Bolts	Precast/Post Tensioned	Concrete Masonry			
Spray-Applied/Fire Proof.	Nondestructive Testing (NDT)	Other			
Offsite Fabricator (if any):					
Description and location of work completed:					
I had sufficient time to inspect all materials used and placed. I was not employed by the contractor,					
su	abcontractor, or material vendor.				
Signed:	Date				
Print Name:	Perm	nit Number:			



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	Permit Number:		
Project Name/Ad	ldress:		
Inspection Type(s)/Coverage:		
Continuous		Periodic	
Time inspections	Began:Time	Inspection Ended:	
Describe inspection	ons and/or tests made, including l	ocations:	
List items requiring correction, include previously listed uncorrected items:			
List changes to approved plans: authorized by Architect, Engineer and/or City of Pomona:			r City of Pomona:
To the best of my knowledge, work inspected was in accordance with the Building & Safety Division's approved plans, specifications, and applicable workmanship provision of the U.B.C except as noted above.			
Signed:		_ Date:	
Print Full Name:	Cit	y I.D. Number:	



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Special Inspector's Correction Notice

	Permit Number:
Project Name/Address:	
Inspection Type(s)/Coverage:	
Continuous	Periodic
Time inspections Began:	Time Inspection Ended:
List items requiring correction, coitems:	prrection of previously listed items, and previously listed uncorrected
Comments:	
Signed:	Date:
Print Full Name:	City I.D. Number:
Note: This report is to remain at the jo	b site with the Contractor for review by the City's Building Inspector.
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