



COMMUNITY DEVELOPMENT DEPARTMENT

411 Main Street - 2nd Floor BUILDING DIVISION
P.O. Box 3420 (530) 879-6700
Chico, CA 95927 Fax (530) 895-4726
http://www.chicoca.gov

Form 09

SPECIAL INSPECTION DOCUMENTATION

Date: _____

PROJECT INFORMATION: Address: _____ Building/Suite # _____

A.P.# (s): _____ APD.# _____

Contact Person's Name: _____ Telephone #: _____

Description of work:

Check applicable sections requiring Special Inspection as described in 2019 CBC, Chapter 17.

(GENERAL: In addition to the inspections required by Section 110.6, the owner or the engineer or architect of record acting as the owner's agent shall employ one or more special inspectors who shall provide inspections during construction on the following types of work):

- 1. Concrete
2. Bolts Installed in Concrete or Masonry
3. Ductile Moment-resisting Concrete Frame
4. Reinforcing Steel and Pre-Stressing Steel
5. Welding (Not required if performed in an approved Fabrication Shop)
6. High-Strength Bolting
7. Structural Masonry
8. Insulating Concrete Fill
9. Spray-applied Fire Proofing
10. Piling, Drilled Piers and Caissons
11. Shotcrete
12. Special Grading, Excavation and Filling
13. Compaction Testing
14. Suspended Ceilings

Owner's Name: _____ Telephone #: _____

Address: _____

Architect/Engineer: _____ Telephone #: _____

Address: _____

Contractor: _____ Telephone #: _____

Address: _____

If City of Chico Pre-Approved Special Inspector(s) is to be used, please list them below. If the inspector to be used is not Pre-Approved, please fill out an Application for Special Inspector Approval and submit to the City of Chico with all accompanying documentation and a check for application fees.

INSPECTOR #1 INFORMATION:

Special Inspector's Name: _____ Telephone #: _____
Company's Name: _____ Telephone #: _____
Address: _____

INSPECTOR #2 INFORMATION:

Special Inspector's Name: _____ Telephone #: _____
Company's Name: _____ Telephone #: _____
Address: _____

INSPECTOR #3 INFORMATION:

Special Inspector's Name: _____ Telephone #: _____
Company's Name: _____ Telephone #: _____
Address: _____

REQUESTED BY:

Applicant: _____
Print Name Signature Date

Company Representative or Property Owner:

Print Name Signature Date

Building Division Use:

Application Reviewed: _____ Approved: _____ Date: _____