



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

Project Description: _____ BP # _____

Address: _____ Building/Suite # _____

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

Contact Person's

Name: _____ Telephone #: _____

Scope of Work

Three horizontal lines for writing the scope of work.

Check applicable sections requiring Special Inspection as described in 2022 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. Structural Welding
6. High-Strength Bolting
7. Structural Masonry
8. Structural Observation
9. Insulating Concrete Fill
10. Spray-Applied Fire Proofing
11. Fire Rated Assemblies
12. Piling, Drilled Piers and Caissons
13. Shotcrete
14. Special Grading, Excavation, Filling
15. Compaction Testing
16. Suspended Ceilings
17. Structural Assembly - Seismic
18. Epoxy
19. _____

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: _____
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