Project location address

Project permit number

To the best of my information, knowledge, and belief, the special inspections required for this project (list specific item number and scope) _________________ as listed in the itemized statement of special inspections submission for plan approval in IBC 1704. 1.1 occurring inspection date _________________ is recorded below:

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

The following discrepancies that were outstanding since the last Interim report dated __________, have been corrected:

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

______________________________________________________________________________________________

(Attach 8 ½ x 11 continuation sheet(s) if required to complete description of corrections) Interim reports numbered _____ to _____, are to be considered an integral part of this report. Prepare reporting forms in a progressive or running list of items that need addressed. Enter the latest inspection discrepancy after those previously listed. Once the issue is resolved, enter a statement of resolution at the end of that item and close with, “This issue is closed”. This will allow us to readily track completion of non-compliant items. Example: Firestopping in north wall is not in conformance with approved plans. Upon re-inspection, firestopping is in compliance. This issue is closed.

___________________________________________  ______________________________
Signature                                      Print Name

___________________________________________  ______________________________
Special Inspection Agency Name                Date

Interim Report of Special Inspection (Revised 5/2016)