



CITY OF SIMI VALLEY

BUILDING AND SAFETY DIVISION
SPECIAL INSPECTION REPORT

Building Permit # \_\_\_\_\_ Address \_\_\_\_\_

General Contractor \_\_\_\_\_ Structural Engineer \_\_\_\_\_

TYPE OF WORK: REINFORCED CONCRETE \_\_\_\_\_ WELDING \_\_\_\_\_ MASONRY \_\_\_\_\_ EPOXY \_\_\_\_\_

PRESTRESSED CONCRETE \_\_\_\_\_ SHOTCRETE \_\_\_\_\_ HIGH STRENGTH BOLTS \_\_\_\_\_ OTHER \_\_\_\_\_

DAILY \_\_\_\_\_ WEEKLY \_\_\_\_\_ FINAL INSPECTION \_\_\_\_\_

Table with 4 columns: WELDER, LICENSE NUMBER, WELDER, LICENSE NUMBER

Table with 2 columns: DESCRIPTION OF WORK INSPECTED AND LOCATION:, DATE:

Table with 5 columns: GROUT, MORTAR, CONCRETE, BLOCK PRISMS, DENSITY

The work that I have inspected has been completed per the approved plans and the requirements of the California Building Code.

Inspector's name \_\_\_\_\_ Date \_\_\_\_\_

Inspector's signature \_\_\_\_\_

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