To: Building Official  Date: ________________

1. Job Address ____________________________  Project # ____________________________

2. □ Piling □ Footing □ Reinforcing Steel □ Concrete □ Gunite □ Masonry
   □ Structural Steel/Welding □ Seismic □ Epoxy □ Other: ____________________________

3. Owner ____________________________ Contractor ____________________________
   Architect ____________________________ Engineer ____________________________

4. Job Description: (Type of Building/Construction, etc.) ____________________________

5. Approximate percentage of deputy work completed: ____________________________

6. Test (type, number and dates made):
   ________________________________________________________________

7. Do plans match work?  □ Yes  □ No
   Are Engineering Changes needed? □ Yes □ No
   If yes, explain: _______________________________________________________

8. Welding Inspection – Please record the following:
   Fabricator: ____________________________  Welding Machine: ____________________________
   Rod or Wire: ____________________________  Certified Welders: ____________________________

9. High Strength Bolts (record specification and sized of bolts/washer used; method of tightening,
   i.e. Ft. Lbs. Torque/turns applied, etc.):
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

10. Give brief description of work inspected this date:
   _________________________________________________________________
   _________________________________________________________________
   _________________________________________________________________

I have represented the owner or his agent (other than the contractor). I have had sufficient time to
inspect the reinforcing steel prior to placing concrete. I certify that the work listed above was inspected
by me and complies with The California Building Code, local codes, and is in compliance with the
approved project plans and specifications.

Print Name ____________________________  Signature ____________________________  LB Cert ____________________________
## WORK INSPECTED LAST WEEK

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<tr>
<th>Date</th>
<th>Hours</th>
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**REMARKS**

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**OUTSTANDING VIOLATIONS**

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