

File No.:	_____
Permit No.:	_____
Date:	_____

Uniform Construction Code  
**SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT**

This statement must accompany permit applications for all construction for which special inspections and observations are required in Chapter 17 of the *International Building Code 2018 (IBC)*

Project name:	
Project address:	
Owner:	Telephone:

This is to certify that all the inspections and observations that I have checked on pages 2-3 and on page 4 of this statement are required for the project named above and will be performed by the designated individuals or firms. By signing this statement, I also acknowledge that:

- these inspections and observations must be performed by competent individuals in accordance with the requirements of the IBC Chapter 17 (as applicable) and that the construction work must comply with the department-approved plans and specifications and all applicable provisions of the uniform construction code;
- records of all required special inspections and testing observations (including any discrepancies and methods of correction of these discrepancies) will be retained and made available to department representatives, upon request; and,
- the final report section of this statement must be signed by me and a copy of this statement submitted to the department inspector, at the time that the final inspection is performed and before a certificate of occupancy is issued.

\_\_\_\_\_  
Name of Design Professional in Responsible Charge

\_\_\_\_\_  
Signature of Design Professional in Responsible Charge

Affix Seal Here

PA License Number \_\_\_\_\_ Date signed (Month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	CREDENTIALS (Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	Inspection of Steel Construction Section 1705.2		
<input type="checkbox"/>	Inspection of Concrete Construction Section 1705.3		
<input type="checkbox"/>	Inspection of Masonry Construction Section 1705.4		
<input type="checkbox"/>	Inspection of Wood Construction Section 1705.5		
<input type="checkbox"/>	Inspection of Soil Conditions Section 1705.6		
<input type="checkbox"/>	Inspection of Driven Deep Foundations Section 1705.7		
<input type="checkbox"/>	Inspection of Cast-in-Place Deep Foundations Section 1705.8		
<input type="checkbox"/>	Inspection of Helical Pile Foundations Section 1705.9		

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	CREDENTIALS (Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	Inspection of Fabricated Items Section 1705.10		
<input type="checkbox"/>	Inspection for Wind Resistance Section 1704.6; 1705.11		
<input type="checkbox"/>	Inspection and Testing for Seismic Resistance Section 1704.6;1705.12;1705.13		
<input type="checkbox"/>	Inspection of Sprayed Fire-Resistant Materials Section 1705.14		
<input type="checkbox"/>	Inspection of Mastic and Intumescent Fire-Resistant Coatings Section 1705.15		
<input type="checkbox"/>	Inspection of Exterior Insulation and Finish System (EIFS) Section 1705.16		
<input type="checkbox"/>	Inspection of Fire-Resistant Penetrations and Joints Section 1705.17		
<input type="checkbox"/>	Testing for Smoke Control Section 1705.18		

# **FINAL REPORT**

## **Required special inspections or observations:**

- |   |   |
|---|---|
| <input type="checkbox"/> Inspection of Steel Construction             | <input type="checkbox"/> Inspection of Fabricated Items                               |
| <input type="checkbox"/> Inspection of Concrete Construction          | <input type="checkbox"/> Inspection for Wind Resistance                               |
| <input type="checkbox"/> Inspection of Masonry Construction           | <input type="checkbox"/> Inspection and Testing for Seismic Resistance                |
| <input type="checkbox"/> Inspection of Wood Construction              | <input type="checkbox"/> Inspection of Sprayed Fire-Resistant Materials               |
| <input type="checkbox"/> Inspection of Soil Conditions                | <input type="checkbox"/> Inspection of Mastic and Intumescent Fire-Resistant Coatings |
| <input type="checkbox"/> Inspection of Driven Deep Foundations        | <input type="checkbox"/> Inspection of Exterior Insulation and Finish System (EIFS)   |
| <input type="checkbox"/> Inspection of Cast-in-Place Deep Foundations | <input type="checkbox"/> Inspection of Fire-Resistant Penetrations and Joints         |
| <input type="checkbox"/> Inspection of Helical Pile Foundations       | <input type="checkbox"/> Testing for Smoke Control                                    |

I certify that I have reviewed the report on each of the inspections or observations checked above. These reports indicate that the covered work is in compliance with the department-approved plans and specifications and all applicable provisions of the uniform construction code.

Signature of Design Professional in Responsible Charge:

Date signed:

\_\_\_\_\_  
(Day/month/year)

KEY for use in **CREDENTIALS** column:  
(on pages 2, 3 and 4)

<b>ACI</b>	American concrete institute certified concrete field testing technician
<b>AWIS</b>	American welding society certified welding inspector
<b>ASNT</b>	American society of non-destructive testing
<b>AWCI</b>	Association of wall and ceiling industries
<b>MCA</b>	Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification
<b>PA</b>	Professional architect (currently licensed)
<b>PE</b>	Professional engineer (currently licensed)
<b>OTHER</b>	Specialized training coursework or other basis for competency deemed acceptable

Department of Labor & Industry | Bureau of Occupational & Industrial Safety | Building Plan Review Division  
651 Boas Street | Room 1600 | Harrisburg, PA 17121-0750 | 717.787.3806 | Fax 717.783.5002 | [www.dli.pa.gov](http://www.dli.pa.gov)

Auxiliary aids and services are available upon request to individuals with disabilities.

Equal Opportunity Employer/Program

## Special Inspections Acknowledgement

This form is only required for construction projects that require Special Inspections of trades outside of the Uniform Construction Code as specified in the plans by the Design Professional in Responsible Charge.

The following parties are aware of the need to hire Special Inspectors for the construction elements included in the Responsible Charge/Special Inspection form. (at least 2 signatures required)

Owner: (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_

Contractor: (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_

Applicant (if different from above): (Print) \_\_\_\_\_

(Signature) \_\_\_\_\_

Date: \_\_\_\_\_