



## Desired Scope of Accreditation for Special Inspection Agency

List the categories of inspection (as per applicable edition of the Local Building Code, Chapter 17 and any additional Building Department/Local Authority Requirement for Special Inspection Program). Please mention the Code edition and section below under each Inspection Category.

Name of Legal Entity: \_\_\_\_\_  
(as exactly mentioned in Legal Register of the State)

Name of the Owner/Co-Owner: \_\_\_\_\_

Name of the Director/Technical Directors: \_\_\_\_\_  
(who are authorized to signing off upon completion of inspection)

Total Number of Qualified and Employed Special Inspectors: \_\_\_\_\_

Total Number of Contracted/Part time Inspectors: \_\_\_\_\_

**NOTES:** Applicants to list relevant version of applicable Code e.g., IBC or Local Building Code Chapter 17 reference section, 1705.5 (2012), (2015), (2018)

To be completed for initial application and for each renewal.

| Special Inspection Category   | Chapter 17, Clause # below |
|---|----------------------------|
| 1. General Building Construction  |                            |
|   |                            |
|   |                            |
|   |                            |
| 2. Fire Code  |                            |
|   |                            |
|   |                            |
|   |                            |
| 3. Mechanical/Fuel Gas/Plumbing Code  |                            |
|   |                            |
|   |                            |
|   |                            |
| 4. Construction Operation/Structural Observation                            |                            |
|   |                            |
|   |                            |
|   |                            |
| 5. Structural Steel( Welding, Bolting, NDT), Structural Wood, Geo-Technical |                            |
|   |                            |
|   |                            |
|   |                            |
| 6. Others (Optional) Example- Energy Code                                   |                            |
|   |                            |
|   |                            |
|   |                            |

Use separate sheet, if required.