

STATEMENT OF SPECIAL INSPECTIONS

Temporary Structures

EVENT ADDRESS (PRINT) _____

PERMIT APPLICATION NUMBER (PRINT) _____

Depending on the type of stage being inspected, there are two options for stage inspections. Please select which type of inspection will be performed. The inspection must be performed by any licensed engineer or architect in the State of Ohio or by a City of Columbus licensed special inspector. Our list of special inspectors can be found here:

https://ca.columbus.gov/ca/Report/ShowReport.aspx?module=Licenses&reportID=2613&reportType=LINK_REPORT_LIST

Inspection Type	Y / N	Inspection Company	Name of Inspector
Special Cases: OBC 1705.1.1			
Steel Construction: OBC 1705.2			

The project registered design professional in responsible charge also acknowledges that he or she is responsible for reviewing and approving the special inspection reports submitted by the special inspectors. Any discrepancies in special inspection reports shall be brought to the attention of the fire and building officials. A final special inspection report documenting required special inspections and corrections of any discrepancies noted in the inspections shall be submitted to the fire official.

FINAL REPORT FOR SPECIAL INSPECTIONS

Inspection Type	Date	Condition/Limitations	Name Of Inspector
Special Cases: OBC 1705.1.1			
Steel Construction: OBC 1705.2			

Registered Design Professional in Responsible Charge:

Name of Design Professional: _____

Ohio Registration No: _____

Name of Company: _____

Signature: _____ Date: _____