



Structural Special Inspection and Observation Program Checksheet

The registered design professional in responsible charge shall prepare and submit a special inspection and structural observation program in accordance with IBC Sections 1704.1.1, 1705.2, and 106.3.4.1, and confirm that the special inspection and structural observations noted below are indicated on the drawings.

~ Please Note that separate Soils and Life Safety Inspection Checksheets may also be required ~

Instructions – Parts D and E of this Checksheet must be fully completed by the Owner (or Architect or Engineer acting as the owner’s agent) in order to obtain your permit.
When complete, return this form to BDS Permitting Services. You may return it in person at 1900 SW 4th Ave, by fax to (503) 823-4172 or by email to specialinspectionsforms@ci.portland.or.us

Application # _____ Date: _____
Project Name: _____
Site Address: _____
Architect of Record (Firm) _____ Phone # _____
Engineer of Record (Firm) _____ Phone # _____

INFORMATION ONLY

The following special inspections and structural observations are required by the State Building Code and City of Portland Special Inspection Program and must be submitted by the Engineer of Record and approved by Bureau of Development Services.

A. REQUIRED SPECIAL INSPECTIONS FOR ALL BUILDING TYPES

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Steel Construction | <input type="checkbox"/> Concrete Construction | <input type="checkbox"/> Anchors – Adhesive | <input type="checkbox"/> Wood Construction |
| <input type="checkbox"/> Curtainwall | <input type="checkbox"/> Prestressed Concrete | <input type="checkbox"/> Anchors – Cast-in-place | <input type="checkbox"/> Masonry |
| <input type="checkbox"/> Structural Silicone Glazing | <input type="checkbox"/> Shotcrete | <input type="checkbox"/> Anchors – Expansion | <input type="checkbox"/> Cold Formed Steel Framing |
| Special Cases: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

B. REQUIRED SPECIAL INSPECTIONS FOR CATEGORY III AND IV BUILDINGS (In addition to those noted above.)

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Seismic Force Resist. System | <input type="checkbox"/> Storage Racks | <input type="checkbox"/> Access Floors | <input type="checkbox"/> Suspended Ceilings |
| <input type="checkbox"/> Mechanical Components | <input type="checkbox"/> Electrical Components | <input type="checkbox"/> Cladding | <input type="checkbox"/> Veneer |
| <input type="checkbox"/> Nonbearing Walls | <input type="checkbox"/> Seismic Isolation System | <input type="checkbox"/> | <input type="checkbox"/> |
| Special Cases: <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

C. STRUCTURAL OBSERVATION

- Required (The stages of construction at which structural observation is to occur shall be indicated on the drawings.)

D. APPROVED SPECIAL INSPECTOR OR INSPECTION AGENCY (To be completed by the applicant.)

Indicate the City approved special inspector or special inspection agency to perform the required special inspections noted in parts A. and B. above:

- | | | |
|--|--|---|
| <input type="checkbox"/> ABC Inspections | <input type="checkbox"/> Structural Inspections Inc. | <input type="checkbox"/> Cutting Edge Inspections |
| <input type="checkbox"/> International Materials Testing | <input type="checkbox"/> Quality Testing Inc. | <input type="checkbox"/> Structural Engineering Testing |

E. To be completed by the applicant.

By completing Part E the project owner (or the Architect or Engineer acting as the Owner’s Agent) hereby agrees to employ the special inspector or inspection agency and/or engineer of record for the above noted special inspections and/or structural observations. (**Contractors are NOT authorized to agree for the Owner.**)

Print Name _____ Date _____
(Project Owner or the Architect or Engineer acting as the Owner’s Agent)

Firm _____ Phone _____

The project owner shall provide a copy of this checksheet to the special inspection agency and engineer of record.
Plans Examiner:

APPLICANT – COMPLETE PARTS D & E



City of Portland, Oregon
Bureau of Development Services
Site Development

1900 SW 4th Avenue, Suite 5000
 Portland, Oregon 97201
 503-823-6892
 Fax 503-823-5433
 TTY 503-823-6868
 www.portlandonline.com/bds

Soils Special Inspection Program Checksheet

The registered design professional in responsible charge shall prepare and submit a special inspection program in accordance with IBC Sections 1704.1.1, 1705.2 and 106.3.4.1 and confirm that the special inspections noted below are indicated on the drawings.

~ Please note that separate Life Safety & Structural Inspection Checksheets may also be required ~

Instructions -- Parts B and Part C of this Checksheet must be fully completed by the Owner (or Architect or Engineer acting as the owner's agent) in order to obtain your permit.

When complete, return this form to BDS Permitting Services. You may return it in person at 1900 SW 4th Ave, by fax to (503) 823-4172 or by email to specialinspectionsforms@ci.portland.or.us

Application # _____ Date: _____
 Project Name: _____
 Site Address: _____
 Architect of Record (Firm) _____
 Engineer of Record (Firm) _____



The following special inspections and observations shall be performed according to the State Building Code and City of Portland Special Inspection Program Administrative Rules unless a program of inspections is submitted by the Engineer of Record and approved by the Bureau of Development Services.

PART A Required Inspections

PART B Designation of Soils Special Inspector

Indicate the City approved inspection agency to perform the special inspections noted in PART A above. If the indicated inspector / agency is different than the geotechnical engineer responsible for the geotechnical design, please contact your plans examiner.

Inspector / Geotechnical Engineer _____ Firm _____ Phone _____

PART C This Checksheet must be completed by the Owner, Architect or Engineer of Record

By completing Part C the project owner (or the Architect or Engineer acting as the Owner's Agent) hereby agrees to employ the soils special inspector for the above noted special inspections. **(Contractors are NOT authorized to agree for the Owner)**

Print Name _____ Date _____
 (Project Owner or the Architect or Engineer acting as the Owner's Agent)

Firm _____ Phone _____

The project owner shall provide a copy of this checksheet to the soils special inspector.

Plans Examiner _____

APPLICANT - COMPLETE PARTS B & C



Life Safety Special Inspection and Observation Program Checksheet

The architect or engineer of record shall prepare and submit a special inspection and structural observation program in accordance with UBC Section 106.3.5. The architect or engineer of record shall confirm that the special inspections noted below are indicated on the drawings.

~ Please note that separate Soils & Structural Inspection Checksheets may also be required ~

Instructions – Parts B and C of this Checksheet must be fully completed by the Owner (or Architect or Engineer acting as the owner’s agent) in order to obtain your permit.

When complete, return this form to BDS Permitting Services. You may return it in person at 1900 SW 4th Ave, by fax to (503) 823-4172 or by e-mail to specialinspectionsforms@ci.portland.or.us

Application # _____ Date: _____
Project Name: _____
Site Address: _____
Architect of Record (Firm) _____
Engineer of Record (Firm) _____



The following special inspections shall be performed according to the State Building Code and City of Portland Special Inspection Program Administrative Rules unless a program of inspections is submitted by the Engineer of Record and approved by the appropriate plan examiner.

PART A

- Fireproofing
- Smoke Control

PART B Mandatory – If any box in PART A is checked, PART B must be completed

APPROVED SPECIAL INSPECTOR OR INSPECTION AGENCY (To be completed by the applicant.)

Indicate the City approved special inspector or special inspection agency to perform the required special inspections noted in Part A. above:

- | | | |
|--|--|---|
| <input type="checkbox"/> ABC Inspections | <input type="checkbox"/> Structural Inspections Inc. | <input type="checkbox"/> Cutting Edge Inspections |
| <input type="checkbox"/> International Materials Testing | <input type="checkbox"/> Quality Testing Inc | <input type="checkbox"/> Structural Engineering Testing |

PART C This Checksheet must be completed by the Owner, Architect or Engineer of Record

By completing Part C the project owner (or the Architect or Engineer acting as the Owner’s Agent) hereby agrees to employ the special inspector or inspection agency for the above noted special inspections. **(Contractors are NOT authorized to agree for the Owner.)**

Print Name _____ Date _____
(Project Owner or the Architect or Engineer acting as the Owner’s Agent)

Firm _____ Phone _____

The project owner shall provide a copy of this checksheet to the special inspection agency.

Plans Examiner: **Attachment C**

APPLICANT – COMPLETE PARTS B and C

Change of Geotechnical Special Inspector

(Date)

City of Portland
Bureau of Development Services
1900 SW 4th Ave, Suite 5000
Portland, OR 97201

Attn: Special Inspection Section

RE: (Project Address)

INFORMATION ONLY

Dear Sirs:

This letter is written to verify that I have in my possession the soils investigation report prepared by _____ writer(s) of the soils investigation report) _____ for the above referenced project.

I have read the report, agree with the recommendations and will take responsibility for the geotechnical special inspections for the project as outlined in the report and/or requested by the Bureau of Development Services.

Sincerely,

(Name)

(Title)

cc:

Attachment D



Bureau of Development Services

City of Portland Special Inspections 1900 SW 4th Avenue, Suite 5000 Portland, OR 97201

Agreement to Complete Elevation Certificate

Instructions -- This Agreement must be fully completed to obtain your permits

⇒ **Part B and Part C** must be completed by the Owner, Architect or Engineer acting as the owner's agent.

When complete, return to Document Services, attn: Special Inspections, or fax to (503) 823-4172.

Application # _____ Date: _____
 Project Name: _____
 Site Address: _____
 Architect of Record (Firm) _____
 Engineer of Record (Firm) _____

INFORMATION ONLY
Phone

PART A Requirements

In accordance with the Federal Emergency Management Agency National Flood Insurance Program and Portland City Code, an Elevation Certificate shall be completed by a Licensed Surveyor or Registered Engineer. The Elevation Certificate shall be based on an as-built survey of the finished construction and shall bear a "wet" stamp of the Licensed Surveyor or Registered Engineer. The completed Elevation Certificate shall be returned to the Special Inspections section of the Office of Planning and Development Review prior to final inspection.

PART B Designation of Licensed Surveyor or Registered Engineer

Indicate the Licensed Surveyor or Registered Engineer to complete the Elevation Certificate.

 Licensed Surveyor/Registered Engineer License No. Firm Phone

PART C This Agreement must be signed by the Owner, Architect or Engineer of Record

The owner hereby agrees to employ the Licensed Surveyor designated in PART B to complete the Elevation Certificate. **(Contractors are NOT authorized to sign for the Owner)**

 Signature of Owner or the Architect or Engineer acting as the Owner's Agent Date _____

Print Name _____ Phone _____

Firm _____ Plans Examiner: _____

Attachment E

Special Inspection

DAILY FIELD REPORT

Project: _____ Date: _____

Job Address: _____ Type of Inspection: _____

Permit No.: _____ Lab. Report No. _____

Weather: _____

Inspection Notes (include location, testing data, substitutions/deviations, materials and methods of construction, conformance statement, etc.)

INFORMATION ONLY

Time Arrived: _____ Inspector: _____

Time Left Job: _____ Certification No.: _____

cc: (Owner)
(Architect)
(Engineer)
(Contractor)

Work Conforms: Yes No

**SPECIAL INSPECTION
NON-COMPLIANCE LIST**

Project: _____ Date: _____

Job Address: _____ Permit No. : _____

Date/Description of Non-Compliance Item: _____

Date of Approval/Remark

INFORMATION ONLY

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.

Inspector: _____ Certification No. _____

- Cc: (owner)
(architect)
(engineer)
(contractor)
(City of Portland)

Special Inspection

FINAL SUMMARY REPORT

(Date)

Bureau of Development Services
1900 SW 4th Ave., Suite 5000
Portland, OR 97201

ATTN: Special Inspection Section

RE: (Project Name)
(Address)

INFORMATION ONLY

Dear :

This is to certify that in accordance with Chapter 17 of the State Building Code and Chapter 24.20, Title 24, of the City Building Regulations we have performed special inspection of the following items:

All inspections and tests were performed and reported according to the requirements of the City Building Regulations and these Administrative Rules and, to the best of my knowledge, the work was in conformance with the applicable workmanship provisions of the State Building Code and Standards.

Very truly yours,

(Name)

(Title)

Cc: (Owner)
(Architect)
(Engineer)
(Contractor)

Attachment H

Request for Approval to Provide Special Inspection of Non-Local Fabrication

(Date)

Bureau of Development Services
1900 SW 4th Ave, Suite 5000
Portland, OR 97201

Attn: Special Inspection Section

Re: (Project Address) (Permit Number)

We propose to have the following testing agency provide special inspection of the fabrication of (items to be fabricated – i.e. structural steel, precast concrete, etc) at (name and address of fabricator).

(Name of the Testing Agency Performing Fabrication Inspections)

(Address)

(Phone Number)



Print the name of the testing agency _____.

Print the name of the primary special inspector for this project _____.

Print the name of the back-up special inspector for this project _____.
(Attach copies of their resumes and certifications)

The fabrication inspections to be performed are (provide outline of inspections to be performed, be specific about times when the inspector will be present at the fabrication site).

The undersigned hereby acknowledge that they have read, understand and will properly enforce the inspection and testing requirements for the above referenced project, as specified in the City of Portland, Bureau of Development Services, Special Inspection Program Administrative Rules and Title 24, City Building Regulations. Further, the undersigned acknowledge that they have no interest (financial, personal or otherwise) in the performance management of the fabricator.

Sincerely,

Signature of Responsible Agency Manager/Supervisor
(Agency Performing Fabrication Inspections)

Date

Signature of Responsible Agency Manager/Supervisor
(Agency Employed by Owner)

Date

Attachment I

SPECIAL INSPECTOR PERFORMANCE REPORT

Special Inspector _____

Project Address _____ Permit Number _____

Date and Time of Inspection _____



Description of Special Inspector's Performance _____

Witness _____

Submitted By _____ Title _____

Signature _____ Date: _____

Findings of Investigation

Contractor's Statement of Responsibility

Each contractor responsible for the construction or fabrication of a system or component in the Quality Assurance Plan must submit a Statement of Responsibility.

Project Name:

Project Address:

INFORMATION ONLY

Permit Number:

Contractor's Name:

Description of system or component included in the Statement of Responsibility:

Contractor's Acknowledgment of Special Requirements

I hereby acknowledge that I have received, read, and understand the Quality Assurance Plan and Special Inspection program.

I hereby acknowledge that control will be exercised to obtain conformance with the construction documents approved by the Bureau of Development Services.

Signature _____ Date _____

Print Name _____ Position In Organization _____

Contractor's Provisions for Quality Control

Procedures for exercising control within the contractor's organization, the method and frequency of reporting and the distribution of reports is attached to this Statement:

Identification and qualifications of the person(s) exercising such control and their position(s) in the organization are attached to this Statement.

Fabricator's Certificate of Compliance

In accordance with Section V, Approved Fabricator, of these Rules and section 1704.2.2 of the State Building Code each approved fabricator that is exempt from special inspection of the shop fabrication shall submit a Fabricator's Certificate of Compliance at the completion of the fabrication.

Project: _____

Fabricator's Name: _____

INFORMATION ONLY

Shop address: _____

Description of structural members and assemblies that were fabricated:

I hereby certify that items described above were fabricated in strict accordance with the approved construction documents.

Signature

Date

Name (print)

Position in Organization

Attachment L