



Rouss City Hall
 15 North Cameron Street
 Winchester, VA 22601

Telephone: (540) 667-1815
 FAX: (540) 722-3618
 TDD: (540) 722-0782
 Website: www.winchesterva.gov

**SPECIAL INSPECTIONS AND TESTING AGREEMENT
 2012 USBC/VCC CHAPTER 17, SECTION 1705**

Permit Number: _____ Use group: _____ Construction type: _____

Project Address: _____

Owner: _____ Address: _____
Street City State Zip

Architect of Record: _____
Name and License Number Company

Structural Engineer of Record: _____
Name and License Number Company

Geotechnical Engineer of Record: _____
Name and License Number Company

General Contractor: _____
Name and License Number Company

Special Inspector: _____
Name and License Number Company

This **Statement of Special Inspections** is submitted as a condition for permit issuance in accordance with the **2012 Virginia Uniform Statewide Building Code**. The **Special Inspections** required shall be conducted in accordance with **Chapter 17, Section 1705** of the **USBC**. The **Special Inspections Engineer of Record** shall keep records of specified testing and special inspections and shall furnish copies of the same to the **Winchester City, Department of Building Inspections** and the appropriate **Registered Design Professional of Record**. Discrepancies from the approved plans and specifications and any code violations observed during conduct of special inspections services shall be brought to the immediate attention of the contractor for correction and to the attention of the **Winchester City, Department of Building Inspections** and to the appropriate **Registered Design Professional of Record**. A **Final Report of Special Inspections** documenting completion of specified testing and special inspections reports shall be submitted to and approved by **Winchester City, Department of Building Inspections** prior to the issuance of a **Certificate of Occupancy**.

Prepared By: _____
(Print) Name Signature Date

Reviewed by Registered Design Professional of Record: _____
(Print) Name Signature Date

Owner's Authorization: _____
(Print) Name Signature Date

"To provide a safe, vibrant, sustainable community while striving to constantly improve the quality of life for our citizens and economic partners."

Code Official's Acceptance: _____
 (Print) Name Signature Date

**SCHEDULE OF REQUIRED SPECIAL INSPECTIONS
 PERMIT NUMBER**

ACTIVITY	REQUIRED Y / N	SCOPE OF SERVICES	AGENT	DATE
STEEL (1705.2)				
WELDING (1705.2.2.1)				
DETAILS				
BOLTS				
CONCRETE (1705.3)				
MATERIAL/ TESTING (1705.3.1)				
MASONRY (1705.4)				
SOILS (1705.6)				
SITE PREPARATION (1705.6)				
FILL PLACEMENT (1705.6)				
IN-PLACE DENSITY (1705.6)				
PILE FOUNDATIONS (1705.7)				
SPRAYED FIREPROOFING (1705.13)				
EIFS (1705.15)				
SPECIAL CASES (1705.1.1)				

**2012 USBC/VCC CHAPTER 17, SECTION 1705
SPECIAL INSPECTIONS
FINAL REPORT**

Permit Number: _____

Address: _____

Special Inspection Engineer of Record:

Inspection reports numbered _____ to _____ and test reports numbered _____ to _____, all submitted prior to this Final Report, form a basis for, and are to be considered an integral part of this final report.

In my professional opinion, the special inspections specified for this project and itemized in the State of Special Inspections submitted for permit has been completed. The building elements subject to special inspections have been found to be in compliance with the City of Winchester approved documents and project specifications. Any violation of the *Virginia Uniform Statewide Building Code* observed in the conduct of special inspection services were brought to the attention of the appropriate registered design professional of record, the City of Winchester, and the owner for resolution and the resolution was approved by the City of Winchester.

Submitted by the Special Inspection Engineer of Records:

Special Inspection Engineer of Record
P.E. Seal

Signature Date

Type or Print Name

Submitted by the Design Professional of Record:

Signature Date

Type or Print Name

Accepted by the Building Official or Designee:

Signature Date

Type or Print Name

