



**COUNTY OF LOS ANGELES • PUBLIC WORKS
BUILDING AND SAFETY DIVISION**

Attn: Special Inspector Testing Program
900 South Fremont Avenue, 3rd Floor
Alhambra, CA 91803

APPLICATION FOR REGISTRATION AS A SPECIAL INSPECTOR

Reinforced Concrete (C), Prestressed Concrete (P), Structural Masonry (M), and
Welding & High Strength Bolting (W)

Applicant Name: _____ **Date:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Email: _____ **Telephone #:** _____ **Cell Phone #:** _____

Driver's License #: _____ **Date of Birth:** _____

DISCIPLINE APPLYING FOR: C P M W Other _____
(Check one box only)

EDUCATION: High School Graduate or Equivalent? YES NO If no, number of years completed _____

Show courses which you have completed that are required and others directly related to the certification for which you are applying

NAME & LOCATION OF SCHOOL	DATES ATTENDED	FIELD OF STUDY	DEGREE OR CERTIFICATE
	From:		
	To:		
	From:		
	To:		
	From:		
	To:		
	From:		
	To:		

EXPERIENCE: Including any periods of self-employment, list all employment for the last 10 years beginning with the most recent.

DATES		EMPLOYER	DUTIES
MONTH & YEAR		NAME OF PRESENT EMPLOYER	JOB TITLE:
FROM	TO	ADDRESS:	DUTIES:
TOTAL			
YEARS	MONTHS	EMPLOYER'S PHONE #	
DATES		EMPLOYER	DUTIES
MONTH & YEAR		NAME OF PREVIOUS EMPLOYER	JOB TITLE:
FROM	TO	ADDRESS:	DUTIES:
TOTAL			
YEARS	MONTHS	EMPLOYER'S PHONE #	

DATES		EMPLOYER	DUTIES
MONTH & YEAR		NAME OF PRESENT EMPLOYER	JOB TITLE:
FROM	TO		DUTIES:
		ADDRESS:	
TOTAL			
YEARS	MONTHS		
		EMPLOYER'S PHONE #	
DATES		EMPLOYER	DUTIES
MONTH & YEAR		NAME OF PREVIOUS EMPLOYER	JOB TITLE:
FROM	TO		DUTIES:
		ADDRESS:	
TOTAL			
YEARS	MONTHS		
		EMPLOYER'S PHONE #	

REFERENCES: Applications will be returned as incomplete without all three (3) letters of reference.

NAME	TITLE	COMPANY	MAILING ADDRESS

I hereby certify that all the information provided on this application is true and correct to the best of my knowledge. I understand that false or misleading information shall provide sufficient cause for disqualification.

Applicant's Full Signature

APPLICATIONS THAT ARE NOT PROPERLY FILLED OUT OR ARE INCOMPLETE WILL BE RETURNED TO THE APPLICANT ALONG WITH THE APPLICATION FEE.



Special Inspector Guidelines and Acknowledgement Form

The Check in Process:

When possible, Special Inspectors are to contact the Building and Safety Field Office before performing site inspections. For inspections request made outside of normal working hours the inspector will contact the Field Office as soon as possible and provide the following information:

- Special Inspector's name
- Special Inspector ID No.
- Location of site
- Time and date on site
- Type of project (Commercial, Industrial, or Residential)

While on site you represent Los Angeles County and the owner of the property.

Arriving on Site:

Ensure you have sufficient time to familiarize yourself with the approved plans prior to making your inspection.

Always review and inspect the project as per the Los Angeles County Building and Safety approved plan.

Making the Inspection and Follow Up:

Verify that the County inspector has signed the job site inspection record card.

When the construction deviates from the approved plans?

Verify that the Engineer of Record has signed the change and it has been stamped and approved by Building and Safety.

All field and lab reports must be signed by the Registered County Special Inspector.

Always review the dailies on a job you have been asked to inspect.

Always carry the Los Angeles County Registration along with the ICC pocket certification and a valid identification card on all inspection sites.

If you have any issues on site, please contact the County inspector for help or assistance.

I acknowledge that I have read and understand the Special Inspector Guidelines.

Signature

Print Name

Date