

CITY OF ORLAND

BUILDING DEPARTMENT

815 Fourth Street
Orland, CA 95963
Telephone (530) 865-1606
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Special Inspection and Testing Agreement

To applicants of projects requiring special inspection or testing as per Section 1704 of the **State of California Building Code**, please review the information below, acknowledge an understanding of the information by signing below, and return this form to the City.

Before a permit can be issued: The Project Engineer or Architect, shall complete, sign, and submit to this Department for review and approval the attached "Structural Tests and Inspection Schedule." The Owner and General Contractor, where applicable, shall also acknowledge the following conditions applicable to Special Inspection and/or Testing.

1. Contractor is responsible for proper notification to the Inspecting or Testing Agency for items listed.
2. Testing laboratory only should take samples and transport them to their laboratory.
3. Copies of all laboratory reports and inspections are to be sent directly to the City by the Testing Agency.
4. Inspection Agency to submit names and qualifications of on-site Special Inspectors to the City for approval.
5. Special Inspectors shall provide appropriate reports to this department of all inspection activity.
6. It is the responsibility of the Contractor to review City approved plans for additional inspection or testing requirements that may be noted.

Before a Certificate of Occupancy Permit can be issued: The Inspection Agency shall submit a statement that all items requiring testing and inspection have been fulfilled and reported. Those items not tested and/or inspected shall be noted in this statement. Copy of statement to be maintained at the job site for City's Building Inspector's review prior to final inspections.

Acknowledgments

Owner Name (Printed)

Owner (Signature)

General Contractor Firm Name (Printed)

General Contractor (Signature)

Project Engineer or Architect Firm Name (Printed)

Project Engineer or Architect (Signature)

Special Inspection Agency Name (Printed)

Special Inspection Agency Rep. (Signature)

Testing Laboratory Name (Printed)

Testing Laboratory Rep. (Signature)

Special Inspection and Testing Schedule

Project Name _____

Project Address _____

Testing Laboratory _____

Inspection Agency or Special Inspector _____

Reinforced Concrete, Gunite, Grout and Mortar:

Concrete	Gunite	Grout	Mortar	
				Aggregate Tests for Mix Design
				Reinforcing Test
				Mix Design-Weighmstr Cert. *
				Reinforcing Placement
				Continuous Batch Plant Insp.
				Inspect Placing
				Cast Samples
				Samples (Pickup/Delivered)
				Compressing Tests *

Precast/Pre-Stressed Concrete

Piles	Post-Tens	Pre-Tens	Cladding	
				Aggregate Tests
				Reinforcing Tests
				Tendon Test
				Mix Designs*
				Reinforcing Placement
				Insert Placement
				Concrete Batching
				Concrete Placement
				Installation Inspection
				Case Samples
				Pick-up Samples
				Compression Tests*

Masonry:

- _____ Special Inspection Streets Used * _____f'm _____f'g
- _____ Preliminary Acceptance Tests (Masonry Units, Wall Prisms)
- _____ Subsequent Tests (Mortar, Grout, Field Wall Prisms)
- _____ Placement Inspection of Units
- _____ Masonry, Mortar, Grout, and Reinforcing Steel Certificates

Periodic Testing:

- _____ Reinforcing Steel Placement
- _____ Pre-Stressing Tendons
- _____ Welding of Reinforcing Steel
- _____ Structural Welding ◊

Additional Instructions, Other Tests and Inspections:

◊ List of Structural Steel Members to be inspected: _____

(Is this list continued on an attached sheet? ___Yes ___No)

* Provide strength required by architect or engineer or location of values in contract document
 ◊ List specific members to be tested or periodically inspected

Completed By: _____ Title: _____ Phone #: _____ Date: _____

Post Installed Anchors:

- _____ Observation of Installation (Select One)
- _____ Periodic _____ Continuous
- _____ Testing Required
- (Describe testing parameters below if required)

Structure Steel/Welding:

- _____ Sample & Test (list specific members below) ◊
- _____ Shop Material Identification (mill cert.)
- _____ Welding Inspection _____ Shop _____ Field
- _____ Ultrasonic Inspection _____ Shop _____ Field
- _____ High-Strength Bolting _____ Shop _____ Field
- A325 _____N _____X _____F
- A490 _____N _____X _____F
- _____ Metal Deck Welding Inspection
- _____ Reinforcing Steel Welding Inspection
- _____ Reinforcing Steel Mill Certificate
- _____ Metal Stud Welding Inspection
- _____ Concrete Insert Welding Inspection
- _____ Moment Resisting Steel Frames

Fireproofing:

- _____ Placement Inspection
- _____ Density Tests
- _____ Thickness Tests
- _____ Inspecting Batch

Insulating Concrete:

- _____ Sample & Test
- _____ Placement Inspection
- _____ Unit Weights

Smoke Control:

- _____ Leakage Testing
- _____ Control Verification

Fill Material:

- _____ Acceptance Tests * _____PSF
- _____ Placement Inspection/Continuous
- _____ Field Density

Structural Wood:

- _____ Shear Wall/Diaphragm Nailing Inspection
- _____ Shear Wall/Diaphragm Anchors
- _____ Inspection of Glu-lam Fab * _____T/C psi
- _____ Inspection of Truss Joist Fab
- _____ Sample & Test Components
- _____ Fabrication Welding of Steel Accessories