



Uniform Code Program



Uniform Procedure I-7: Special Inspections

SPECIAL INSPECTOR REGISTRATION

NAME: _____ Registration No.: _____

COMPANY: _____ City Business License No.: _____

PHONE & E-MAIL: _____ Date: _____

ADDRESS: _____

I. Categories of Registration:

- 1. Reinforced Concrete (RC)
- 2. Structural Masonry (SM)
- 4. Welding & Bolting (WB)
- 3. Pre-stressed/Post-tensioned Concrete/Masonry (PC)
- 5. Spray-applied Fireproofing (SF)
- 6. Other: _____

II. Related Certifications in Good Standing:

- | | | |
|---|--|--|
| ICBO <input type="checkbox"/> Structural Steel & Welding | <input type="checkbox"/> Structural Masonry | <input type="checkbox"/> Spray-Applied Fire Proofing |
| ACI + <input type="checkbox"/> Reinforced Concrete | <input type="checkbox"/> Pre-stressed Concrete | |
| LA. City <input type="checkbox"/> Reinforced Concrete | <input type="checkbox"/> Structural Masonry | <input type="checkbox"/> Structural Steel & Welding |
| <input type="checkbox"/> Fireproofing Controlled Activity | <input type="checkbox"/> Grading | |
| L. A. County <input type="checkbox"/> Reinforced Concrete | <input type="checkbox"/> Pre-stressed Concrete | <input type="checkbox"/> Structural Masonry |
| <input type="checkbox"/> Welding & High-strength Bolting | | |

III. Education & Experience:

Please complete the education and experience information on the reverse side of this form.

IV. Declaration

I hereby affirm that all the information I have given herein is true and complete to the best of my knowledge, and that I will inform this jurisdiction in the event any certification listed above is no longer in good standing. I understand that any false statement herein will subject me to disqualification anytime.

Signature Date

Supporting documents verified by:

Signature Date

Application for Registration Approved by:

Signature Date

EDUCATION AND EXPERIENCE

E D U C A T I O N	EDUCATION: Circle Last Grade Completed: 8 9 10 11 12		DID YOU GRADUATE? YES NO		IF NOT, HAVE YOU PASSED GED ? YES NO		
	NAME AND LOCATION OF COLLEGES OR TRADE SCHOLLS ATTENDED	DATES ATTENDED	CREDITS COMPLETED		MAJOR	UNITS COMPLET ED IN MAJOR	DEGREES OR CERTIFICATES RECEIVED
			SEM UNIT S	QTR. UNIT S			
		FROM					
		TO					
		FROM					
		TO					
		FROM					
		TO					
		FROM					
		TO					

EXPERIENCE: Begin with your most recent job. List each job separately. List all jobs and any periods of unemployment in the last 10 years. Include military service. Also list any job you held more than 10 years ago, which relate to the job for which you are applying and indicate the number of months and years that you worked.

DATES		EMPLOYERS	DUTIES				
MONTH AND YEAR		NAME OF PRESENT OR LAST EMPLOYER	YOUR TITLE				
FROM	TO		DUTIES				
		ADDRESS					
TOTAL							
YEAR	MONTH	PHONE NUMBER	Concrete	Masonry	Steel	Fireproofing	Others
			%	%	%	%	%

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MONTH AND YEAR		NAME OF PRESENT OR LAST EMPLOYER	YOUR TITLE				
FROM	TO		DUTIES				
		ADDRESS					
TOTAL							
YEAR	MONTH	PHONE NUMBER	Concrete	Masonry	Steel	Fireproofing	Others
			%	%	%	%	%

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TOTAL							
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			%	%	%	%	%

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			%	%	%	%	%