



COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY DIVISION

SPECIAL INSPECTOR REPORT

Each inspector must complete this report and mail it to the *District Office* where the permit was issued.

DAILY WEEKLY FINAL

Report Date _____ Building Permit # _____ District Office# _____

Job Address _____

General Contractor _____ Engineer of Record _____

Inspection Frequency: Continuous Periodic

Type of Inspection: Reinforced Concrete Gunitite / Shotcrete Prestressed Concrete Masonry

For any of above types of inspections provide Design Mix _____ PSI _____

Welding High-Strength Bolts Epoxy Other _____

Location on Site _____

Description of Work _____

Discrepancies _____

All work on this job to date HAS / HAS NOT been satisfactorily completed in conformance with the approved plans and requirements of the Los Angeles County Building Code.

Signature _____ LA Co ID # _____ Date _____

Print Full Name _____ Daytime Phone # _____