



City of Opa-locka Building Department

780 Fisherman Street 1st Floor Suite 130-B

Opa-locka, Florida 33054

(305) 953-2868 Option 4

NOTICE TO CITY OF OPA-LOCKA BUILDING DEPARTMENT OF EMPLOYMENT **AS SPECIAL INSPECTOR UNDER THE FLORIDA BUILDING CODE**

I, (We) have been retained by (permit holder) _____ to perform
Inspection services under the Florida Building Code at the (address) _____
project on the listed permit number _____ as of _____ (date). I am a registered
architect or professional engineer licensed in the State of Florida with license number _____.

- ☐ SPECIAL INSPECTOR FOR PILING, CMDC sect. 8-22
- ☐ SPECIAL INSPECTOR TRUSSES>35' LONG OR 6' HIGH, CMDC sect. 8-22
- ☐ SPECIAL INSPECTOR FOR REINFORCED MASONRY, FBC 2122.24 & CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR STEEL CONNECTIONS, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR SOIL COMPACTION under Concrete Slabs, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR PRECAST UNITS & ATTACHMENTS, CMDC sect 8.22
(For tilt-up walls systems, inspect reinforcement as well)
- ☐ SPECIAL INSPECTOR FOR CURTAIN WALL, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR STRUCTURAL GLAZING, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR LIGHTWEIGHT INSULATING CONCRETE, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR COMPOSITE FLOOR SYSTEM, CMDC sect 8.22
- ☐ SPECIAL INSPECTOR FOR _____

Note: Only the marked boxes apply.

The following individual (s) employed by this firm, or me are authorized representatives to perform inspection*

1. _____ 2. _____
3. _____ 4. _____

**Special inspectors utilizing authorized representatives shall insure the authorized representative is qualified by education or licensure to perform the duties assigned by the Special Inspector. The qualifications shall include: licensure as a professional engineer or architect; graduation from an engineering education program in civil or structural engineering; graduation from an architectural education program; successful completion of the NCEES Fundamentals Examination; or registration as building inspector or general contractor.*

I, (we) will notify City of Opa-locka Building Department of any changes regarding authorized personnel performing inspection services.

I, (we) understand that a Special Inspector inspection log for each building must be displayed in a convenient location on the site for reference by the City of Opa-locka Building Department Inspector. All mandatory inspections, as required by the Florida Building Code, must be performed by the City. The City building inspections must be called for on all mandatory inspections. Inspections performed by the Special Inspector hired by the Owner are in addition to the mandatory inspections performed by the Department. Further, upon completion of the work under each Building Permit I will submit to the Building Inspector at the time of final inspection the completed inspection log form and a sealed statement indicating that, to the best of my knowledge, belief and professional judgment those portions of the project outlined above meet the intent of the Florida Building Code and are in substantial accordance with the approved plans.

Engineer/Architect

Print Name _____

Address _____

Phone # _____

Signed and Sealed _____

Date _____

A copy of this application shall be kept at the job site along side log of inspections.

SAMPLE

THIS DOCUMENT MUST BE PREPARED ON STATIONERY WITH AN ARCHITECT OR ENGINEER'S LETTERHEAD BY THE ARCHITECT OR ENGINEER OF RECORD (OR IN EXIGENT CONDITIONS, AND WHEN APPROVED BY THE BUILDING OFFICIAL, ANOTHER ARCHITECT OR ENGINEER).

STATEMENT OF INSPECTION

(date)

**City of Opa-locka Building Department
780 Fisherman Street 4th Floor
Opa-locka, Florida 33054**

**RE: (owner's name)
(project address)
(permit number)
(contractor's name)**

Dear Building Official:

I, (architect or engineer), having performed and approved the required inspections, as indicated in the attached approved inspection log, hereby attest that to the best of my knowledge and belief, the above-described construction of all structural load-bearing components complies with the permitted documents, and the shoring and re-shoring conforms to the shoring and re-shoring plans submitted to the enforcement agency.

This document is being prepared in accordance with Section 105.13.4.1 of the Florida Building Code and is being submitted to the Opa-locka Building Department at the time of the final inspection for the above referenced structure.

Should you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

(ARCHITECT OR ENGINEER'S SIGNATURE AND SEAL)



“A COMMUNITY OF BROTHERHOOD AND SISTERHOOD”

SPECIAL INSPECTOR’S COMPLETION STATEMENT

(BUILDING & STRUCTURAL TRADE)

DATE: _____

City of Opa-locka Building Department
780 Fisherman Street 4th Floor
Opa-locka, Florida 33054

Gentlemen:

I/We _____, having been
retained as Special Inspector for (project) _____,
located at (address) _____.

Hereby state that to the best of my/our knowledge, the construction of all structural load bearing components of this project complies with the permitted documents, and the shoring and re-shoring conforms with the shoring and re-shoring plans submitted to the City of Opa-locka Building and Zoning Department. Furthermore, the work complies with all of the latest requirements of the Florida Building Code.

Very truly yours,

Architect/Engineer’s Signature

Architect/Engineer’s Seal

City Hall | 780 FISHERMAN STREET 4TH FLOOR | OPA-LOCKA, FLORIDA 33054 | (305) 953-2868 OPTION 6
AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF HANDICAP

INSPECTION LOG

LOG OF APPROVED INSPECTIONS TO COMPLY WITH FLORIDA BUILDING CODE 105.13.4.1

PERMIT# _____	ADDRESS _____
A/E _____	CONTRACTOR: _____
TYPE OF INSPECTION: FOUNDATION	
COMMENTS:	
APPROVED BY: _____ DATE: _____	
TYPE OF INSPECTION: REINFORCING	
COMMENTS:	
APPROVED BY: _____ DATE: _____	
TYPE OF INSPECTION: ROOF TRUSS, BRACING AND SHEATHING	
COMMENTS:	
APPROVED BY: _____ DATE: _____	
TYPE OF INSPECTION: WINDOWS AND DOORS	
COMMENTS:	
APPROVED BY: _____ DATE: _____	
TYPE OF INSPECTION: AS-BUILT	
COMMENTS:	
APPROVED BY: _____ DATE: _____	
TYPE OF INSPECTION: OTHER (SPECIFY)	
COMMENTS:	
APPROVED BY: _____ DATE: _____	