



CITY OF LAGUNA BEACH
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION

505 FOREST AVENUE • LAGUNA BEACH, CALIFORNIA 92651 • (949) 497-0715

www.lagunabeachcity.net | Fax (949) 497-0771

SPECIAL INSPECTOR APPLICATION

Name _____ Date: _____

Address _____ # _____

City _____ State _____ Zip _____

Office Phone () _____ Cell () _____

Email Address _____

Current ICC Certification number for the type the discipline(s) for which you are requesting approval:

Concrete _____ Masonry _____ Steel _____ Other _____

DECLARATION:

I have read and understood the Special Inspector’s instruction pamphlet published by the City of Laguna Beach and available online. I agree to abide by the minimum rules and will use the prescribed procedures stated therein. I agree to notify the City prior to on-site deputy inspections that I may perform in Laguna Beach. I will submit, in a timely manner, reports on Laguna Beach. I will submit, in a timely manner, reports on Laguna Beach forms for all inspections that I perform. I will perform no inspection on jobs that are not permitted or that the City approved plans are not available on-site.

AGREED this date ___/___/___

By: _____ *(applicant’s signature)*

(for office use only)

APPROVED ___/___/___ **EXPIRES:** ___/___/___

DENIED ___/___/___ **REASON:** _____

BUILDING DIVISION: _____