

# SPECIAL INSPECTIONS FINAL REPORT



102 Town Hall Drive, Leland, NC 28451  
www.townofleland.com

Permitting & Inspections Department  
Phone 910-371-3754

Project: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Project location/ Address: \_\_\_\_\_

Project Primary Contact: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

## List of Performed Special Inspections

- |   |   |
|---|---|
| <input type="checkbox"/> Structural Steel & High Strength Bolting | <input type="checkbox"/> Rammed Aggregate Piers & Stone Columns           |
| <input type="checkbox"/> Welding of Structural Steel              | <input type="checkbox"/> Sprayed Fire-Resistant Material                  |
| <input type="checkbox"/> Cold-Formed Steel Deck                   | <input type="checkbox"/> Mastic & Intumescent Fire-Resistant Coatings     |
| <input type="checkbox"/> Open-Web Steel Joists & Joist Girders    | <input type="checkbox"/> Exterior Insulation & Finish System              |
| <input type="checkbox"/> Concrete Construction                    | <input type="checkbox"/> Fire-Resistant Penetrations & Joints             |
| <input type="checkbox"/> Masonry Construction                     | <input type="checkbox"/> Smoke Control                                    |
| <input type="checkbox"/> Wood Construction                        | <input type="checkbox"/> Site Retaining Wall & Systems                    |
| <input type="checkbox"/> Soils                                    | <input type="checkbox"/> Special Inspections for Wind Resistance          |
| <input type="checkbox"/> Driven Deep Foundations                  | <input type="checkbox"/> Special Inspections for Seismic Resistance       |
| <input type="checkbox"/> Cast-in-Place Deep Foundations           | <input type="checkbox"/> Other: _____                                     |
| <input type="checkbox"/> Helical Pile Foundations                 | <input type="checkbox"/> No Special Inspections Required Per Section 1705 |

I certify that I performed special inspection on the following portions of the work at the above address that required continuous inspections, and for which I was employed. Based upon inspections performed and my substantiating reports, it is my professional judgment that, to the best of my knowledge, the inspected work was performed in accordance with the approved plans, specifications and applicable workmanship provisions of the *North Carolina Building Code*. *The Town of Leland Inspections Department will require the signature/stamp of the engineer responsible for special inspections.*

Prepared By:

\_\_\_\_\_  
Type or print name

\_\_\_\_\_  
Engineer License

\_\_\_\_\_  
ID/ Certificate Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Engineer Seal	
<input type="checkbox"/> PASSED	<input type="checkbox"/> FAILED