CITY OF NEWPORT BEACH

COMMUNITY DEVELOPMENT DEPARTMENT

BUILDING DIVISION

100 Civic Center Drive | P.O. Box 1768 | Newport Beach, CA 92658
www.newportbeachca.gov | (949) 644-3200

SPECIAL INSPECTION
Final Project Report

Project Address:_____

Permit Number:_____

Inspection Type (s):_____

Inspection Date (s):_____

This is to certify that I performed special inspection on the following portions of the work at the above address which required continuous inspection, and which I was employed to inspect:

Based upon my personal observation and written reports of this work, it is my judgment that the inspected work was performed, to the best of my knowledge, in accordance with the approved plans, specifications, and the applicable workmanship provisions of the Uniformed Building Code.

Special Inspector Signature:	Date:
Print Full Name:	**Newport Beach Registration No.:**