



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 REPORT

Project Address: _____

Permit Number: _____

Inspection Type (s): _____

Inspection Date (s): _____ () Periodic () Continuous

Describe Inspection, Including Location(s):

List Tests Made:

Total Inspection Time Each Day:					
Date:					
Hours:					

List All Items Requiring Correction (Include Previously Listed Uncorrected Items):

Comments:

To the best of my knowledge, the work inspected was in accordance with the Building Division approved design drawings, specifications and applicable workmanship provisions of the U.B.C. except as noted above.

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