



DEPARTMENT OF RESOURCE MANAGEMENT

Building Division

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SPECIAL INSPECTION AND CODE COMPLIANCE VERIFICATION

(Rev: 04-12-17)

DATE: _____ PERMIT NO. _____

SITE LOCATION: _____

OWNER'S NAME: _____ PHONE: _____

MAILING ADDRESS: _____

CITY/STATE: _____ ZIP: _____

ASSESSOR'S PARCEL NUMBER: _____

INSPECTION REQUESTED

- () EROSION CONTROL ONLY INSPECTION with EROSION CONTROL CHECKLIST FORM _____
- () CLEAR WARNING NOTICE VIOLATIONS with WARNING NOTICE ITEMS IDENTIFIED FOR INSPECTOR _____
- () INSPECTION FOR HABITABILITY (Description): _____
- () PLANNING - CODE COMPLIANCE OF STRUCTURE/USE - (Description): _____
- () INSPECTION FOR AN AS-BUILT STRUCTURE – (Description): _____

NOTE: THIS INSPECTION IS BASED ON ITEMS THAT ARE VISIBLE & CORRECTIONS MAY REQUIRE A SEPARATE BUILDING PERMIT.

I hereby affirm under perjury that I am the [] owner [] contractor [] agent [] renter. I certify that I have read this form and state that the above information is correct. I agree to comply with all County Ordinances and State Laws relating to this Special Inspection and hereby authorize representatives of Shasta County to enter upon the above mentioned property for inspection purposes.

SIGNED: _____ DATE: _____

.....**OFFICIAL USE ONLY**.....

LIST OF CORRECTIONS:

- | | |
|--|----------------|
| 1. IS THE STRUCTURE HABITABLE? | () YES () NO |
| 2. DOES A BUILDING PERMIT NEED TO BE OBTAINED? | () YES () NO |
| 3. DID THE INSPECTION CLEAR ALL VIOLATIONS? | () YES () NO |
| 4. CAN A NOTICE OF COMPLIANCE BE PREPARED? | () YES () NO |
| 5. IS A RE-INSPECTION REQUIRED? | () YES () NO |

COMMENTS: _____

SIGNED: _____ DATE: _____