

Special Inspector Application

Address: 111 N Front Street, Columbus, Ohio 43215

Phone: 614-645-7433

Email: bzslicensing@columbus.gov

Website: www.columbus.gov/bzs

INFORMATION FOR SPECIAL INSPECTOR APPLICATION

Section 4114 of the Columbus Building Code requires the following to be presented to secure a contractor registration. For application requirements for any license or registration, refer to Columbus Building Code, Chapter 4114.

☐ Special Inspector Application: Completed and notarized application must be submitted no later than seven (7) days prior to the board meeting. The tentative meeting schedule for the Columbus Building Commission is the 3rd Tuesday of every month.

☐ Copy of a resume listing the minimum qualifications for each special inspection category requested and a current copy of all certifications must be attached to the complete registration application.

Note: Review all information and have your application notarized before filing for a license. If the application is not notarized, all documents will be returned without being processed.

BOARD APPLICATION FEE

Information can be found in the Contractor License & Registration Fees area of the Combined Development Related Fee Schedule. Make checks payable to the Columbus City Treasurer. All fees are non-refundable.

Application may be submitted by email, mail or in person:

- Email: BZSLicensing@Columbus.gov (you will receive an email containing a link to pay the fee online)
- Address: City of Columbus - Building & Zoning Services, 111 N Front Street, Columbus, Ohio 43215

For additional information, contact the Customer Service Center at BZSLicensing@columbus.gov or (614) 645-7433 or visit us online at www.columbus.gov/bzs.

Columbus Building Code, Section 4114.902: Minimum qualifications for a Department issued registration:

(B) The applicant for special inspector registration shall meet the following requirements:

- (1) Be not less than 18 years of age; and
- (2) Be a United States citizen or national, a lawful permanent resident, or an individual authorized to work in the United States; and
- (3) Meet the minimum qualifications required by the Chief Building Official.

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AND ZONING SERVICES

NOTE: For application requirements for ANY license or registration, refer to Columbus Building Code, Chapter 4114.

Specify the special inspector categories you would like to be considered for:

- | | |
|---|--|
| ☐ Steel Construction (High-Strength Bolts) | ☐ Steel Construction (Welding) |
| ☐ Concrete Construction | ☐ Masonry Construction |
| ☐ Wood Construction | ☐ Soils |
| ☐ Driven Deep Foundation | ☐ Cast-in-Place Deep Foundations |
| ☐ Helical Pile Foundations | ☐ Fabricated Items |
| ☐ Wind Resistance | ☐ Seismic Resistance |
| ☐ Testing of Seismic Resistance | ☐ Sprayed Fire-Resistance Material |
| ☐ Mastic and Intumescent Fire-Resistant Coatings | ☐ Exterior Insulations and Finish Systems |
| ☐ Water-Resistive Barrier Coatings | ☐ Fire-Resistant Penetrations and Joints |
| ☐ Smoke Control Systems | ☐ Photovoltaic Systems |
| ☐ MASS Timber | ☐ Medium or High Voltage Systems |
| ☐ Private Water Service or Water Mains - Underground, Restraints, Backfill | |
| ☐ Other (specify): _____ | |

I, the undersigned, hereby apply for a Contractor Registration, in the City of Columbus, Ohio, and for that purpose give the following information and answers to all the questions contained in this application.

Full Name: _____ Date of Birth: ____/____/____

Street Address, City, State, Zip: _____

Phone Number: _____

Email Address for notification of permits issued under applicant's registration:

Email Address for communication related to issuance of applicant's registration:

Have you previously held this type of registration with the City of Columbus? ☐ Yes ☐ No

If yes, provide the following if known: Registration Number: _____

Have you ever been summoned before any City of Columbus Contractor Board of Review for any type of violation hearing? ☐ Yes ☐ No

If yes, which board? _____ Date: _____ Board Decision: _____

ASSIGNMENT OF REGISTRATION TO BUSINESS CONCERN

By completing this section, the applicant confirms their association with the business concern as a legal full-time officer, proprietor, partner, or employee. The applicant will be actively engaged in and perform work only for the business concern listed below.

Business Name: _____ Phone Number: _____

Street Address, City, State, Zip: _____

EMPLOYMENT & CERTIFICATIONS

Attach a resume listing the minimum qualifications for each special inspection category requested and provide a current copy of all certifications.

STATEMENT BY APPLICANT

I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my registration and may subject me to prosecution under Ohio Revised Code Section 2921.13.

Print Name: _____ Date: _____

Signature of Applicant: _____

Sworn to before me and signed in my presence this _____ day of _____ in the year _____.

Notary Seal here

Signature of Notary Public or Building & Zoning Services Official

OFFICIAL USE ONLY

Board Action for Certification: ☐ Approved ☐ Disapproved

Board Member Initials:

YES _____ | _____ | _____ | _____ | _____ | _____ | _____

Date: _____

NO _____ | _____ | _____ | _____ | _____ | _____ | _____

Date: _____

Signature of Board Chairman: _____ Review Date: _____

By (Secretary): _____ Date: _____