

Statement of Special Inspections

111 N Front Street, Columbus, Ohio 43215

Phone: 614-645-4522 • ZoningInfo@columbus.gov • www.columbus.gov/bzs

TEMPORARY STRUCTURES

Event Address (Print) _____

Permit Application Number (Print) _____

Depending on the type of stage being inspected, there are two options for stage inspections. Please select which type of inspection will be performed. The inspection must be performed by any licensed engineer or architect in the State of Ohio or by a City of Columbus licensed special inspector. Our list of special inspectors can be found here:

https://ca.columbus.gov/ca/Report/ShowReport.aspx?module=Licenses&reportID=2613&reportType=LINK_REPORT_LIST

All information above the line is required upon Building / Fire Department plan review. The final report at the bottom is only required after the inspection is performed.

Inspection Type	Y/N	Inspection Company	Name of Inspector
Special Cases (Mobile Stages): OBC 1705.1.1			
Steel Construction (Platform Stages): OBC 1705.2			

Registered Design Professional In Responsible Charge Or Performing The Inspection:

Name of Design Professional: _____

Ohio Registration No: _____

Name of Company: _____

Signature: _____ Date: _____

The project registered design professional in responsible charge also acknowledges that he or she is responsible for reviewing and approving the special inspection reports submitted by the special inspectors if one is used. Any discrepancies in special inspection reports shall be brought to the attention of the fire official. A final special inspection report documenting required special inspections and corrections of any discrepancies noted in the inspections shall be submitted to the fire official.

FINAL REPORT FOR SPECIAL INSPECTIONS

The final report is only required after the inspection is performed.

Inspection Type	Date	Condition/Limitation	Name of Inspector
Special Cases (Mobile Stages): OBC 1705.1.1			
Steel Construction (Platform Stages): OBC 1705.2			