



CITY OF MISSION VIEJO
Building and Safety Division
200 Civic Center
Mission Viejo, CA 92691
Phone: (949) 470-3054
Fee: None

*After completed please email the form to the Building Division:
bldgservices@cityofmissionviejo.org*

APPLICATION FOR SPECIAL INSPECTOR

Inspector Name: _____ Date: _____

Street Address: _____

City / State / Zip: _____

Phone: _____ Email: _____

Job Address: _____ Permit # _____

Type of Inspection: _____

TYPE OF CERTIFICATE REQUIRED: (Please check all that apply)

Required: Attach a copy of identification and certification for each category you will be registering for.

Concrete

Prestressed Concrete

Epoxy Anchor Bolts

Structural Steel/Welding

Guniting

Fireproofing

Shot Crete

Asphalt

Qualifications:

Type of Certificate: _____ Certificate No.: _____ Expiration Date: _____

APPROVED

DENIED

By: _____
 Inspection Supervisor

Reason for Denial: _____

