

Deputy Inspector Application Guidelines

The Building Official has the responsibility to ascertain that Special Deputy Inspectors are qualified for the type of inspection required. Qualifications should be measured against the standards listed below:

1. Qualification must include ICC Certification as a special deputy inspector for the discipline in which an individual is requesting approval. Along with your ICC, please include a current City or County license from other jurisdictions.
2. The Building Official may require an oral interview and/or written examination, if necessary, to verify the applicant's knowledge of jurisdictional procedures and requirements.
3. Additional qualifications required:
 - a. Reinforced concrete special inspector; A.C.I. certification as a Concrete Field Technician-Grade I. For further information, contact The American Concrete Institute, Box 0094, Farmington Hills, MI 48333-9095. (284) 848-3700
 - b. Must possess the ability to write legible and concise reports using the nomenclature of the building industry. The ability to communicate on a professional level with contractors, sub-contractors, architects and engineers.
 - c. The Building Official may require additional qualifications for specific projects in any discipline when deemed necessary.
4. Experience and education requirement:
 - a. Five (5) years experience in trade of discipline in which you are requesting certification. This must include at least one (1) year at supervisory level. Major course work in architecture, engineering or building technology at college/trade school level may be substituted for one or more years of this requirement. Must possess the ability to write legible and concise reports using the nomenclature of the building industry. The ability to communicate on a professional level with contractors, sub-contractors, architects and engineers.

APPLICATION INSTRUCTIONS

1. Please print or type the information requested.
2. Include only experience in the specific field or area of construction in which you are requesting certification.
3. Letters will be sent to the references you have given on your application for verification of experience and qualifications; however, if you do not wish us to contact your present employer, so indicate on the application in the line provided.
4. Attach photocopies of your ICC, ACI, and CWI certificates, as well as other proctored licenses from other jurisdictions and a photocopy of your driver's license.
5. The administrative application fee to become a "new" deputy inspector has increased to \$300.00. This is a one-time fee assuming that you renew yearly as stated below. The total due at time of issuance of one certification, administrative fee, and surcharge is \$419.20, but will be collected only upon awarding of the certification. The annual "renewal" fee for **each** deputy certification on your license is \$78.60. **Send no money at the time of application.** Bring cash, checkbook or a valid credit card with you to the personal interview.
6. All certificates issued by the Building Official shall expire one (1) year from the date of issuance. They may be renewed within sixty - (60) days after the expiration date for a renewal fee of \$78.60. Certificates expired more than 60 days but less than one year may be renewed for \$200.00. Certificates expired for more than one year shall require submission of a new application and application fees plus the annual certification fee of \$300.00.

Mail application to: City of Long Beach
Long Beach Development Services, 2nd Floor
411 W. Ocean Boulevard
Long Beach, CA 90802
Attn: Deputy Inspector Program

Special Deputy Inspector Application

APPLICATION FOR SPECIAL DEPUTY INSPECTOR

DEPUTY
RENEWAL # **D** _____

NEW
DEPUTY # _____

DATE: _____

*CONCRETE (incl. CAISSONS)

*MASONRY

*STRUCTURAL STEEL & WELDING

*PRESTRESS

*DRIVEN PILES

*FIREPROOFING

*WOOD SHEAR

EPOXY / DRILLED IN ANCHORS

OTHER _____

*DENOTES PROCTORED EXAM RESULTS REQUIRED

The undersigned hereby applies for certification as a Special Deputy Inspector as provided by Municipal Code of the City of Long Beach, California.

NAME: _____
LAST
FIRST
MI

ADDRESS _____
STREET
CITY
ZIP

TELEPHONE _____ BIRTHDAY _____
WORK
HOME
MO
DATE
YEAR

EMAIL ADDRESS: _____

List below your employers beginning with most current. Be sure to provide addresses and phone numbers.

DATES EMPLOYED	NAMES AND ADDRESSES OF EMPLOYERS	POSITIONS/DUTIES
FROM	EMPLOYER	
TO	ADDRESS & ZIP TELEPHONE	OKAY TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO
FROM	EMPLOYER	
TO	ADDRESS & ZIP TELEPHONE	OKAY TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO
FROM	EMPLOYER	
TO	ADDRESS & ZIP TELEPHONE	OKAY TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO
FROM	EMPLOYER	
TO	ADDRESS & ZIP TELEPHONE	OKAY TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO

EDUCATION

SCHOOL OR COLLEGE	COURSE OF STUDY	UNITS EARNED	YEAR

HIGHEST GRADE COMPLETED _____ YEAR _____

EXPERIENCE

ICBO CERTIFICATION HISTORY (LIST BELOW AND ENCLOSE COPIES)

DISCIPLINE	EXPIRATION DATE	YEAR FIRST ISSUED	CERT NO.	LAST PROCTORED EXAM DATE

SPECIAL DEPUTY LICENSES (LIST BELOW AND ENCLOSE COPIES)

JURISDICTION	DISCIPLINE	CERT. NO.	EXPIRATION DATE

I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND UNDERSTAND FALSE STATEMENTS OR MISINFORMATION WILL DISQUALIFY ME IN BEING CERTIFIED.

SIGNATURE

DATE

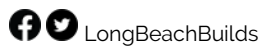


City of Long Beach

411 W. Ocean Blvd., 3rd Floor

Long Beach, CA 90802

Visit us at longbeach.gov/lbds



This information is available in alternative format by request at 562.570.6257.

For an electronic version of this document, visit our website at longbeach.gov/lbds.