



# NOTICE OF INTENT TO USE THIRD PARTY INSPECTION AGENCY

The purpose of this notification is to advise the City Of Richmond of the Permit Applicant's intention to utilize third party inspection services in connection with the following construction project. Use a separate form for each Third Party Agency being used on the project.

**\*\*\*SUBMIT ONLY THIS FORM. NO ATTACHMENTS ARE REQUIRED\*\*\***

## SECTION A - PROPERTY OWNER/AGENT INFORMATION

OWNER/AGENT NAME \_\_\_\_\_  
PHONE NUMBER (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_  
EMAIL (REQUIRED) \_\_\_\_\_ FAX NUMBER (\_\_\_\_) \_\_\_\_\_  
PROJECT NAME \_\_\_\_\_  
PROJECT ADDRESS \_\_\_\_\_

## SECTION B - PRIMARY THIRD PARTY INSPECTION AGENCY

List only one third party agency per form

THIRD PARTY AGENCY \_\_\_\_\_ PRIMARY AGENCY YES NO  
CITY OF RICHMOND CERTIFICATION NUMBER \_\_\_\_\_  
PROJECTED /ACTUAL DATE OF FIRST INSPECTION \_\_\_\_\_  
(COR may conduct audit inspections after project has begun)

## SECTION C - PERMITS

List all permits/ permit numbers for the above noted project

Building	Mechanical	Fire Alarm	Electrical
Sprinkler	Gas	Security	Plumbing
Other			

## SECTION D - ACKNOWLEDGEMENTS

By submitting this form, I certify that the above statements on this application are true and complete to the best of my knowledge and belief. I agree to comply with all applicable laws and regulations of the City Of Richmond. Signature/submission by a Third Party Agency indicates a contractual relationship between that agency and the building owner. The making of false statements on this application is punishable by law.

### PROPERTY OWNER / AGENT

Third Party Agency cannot sign/submit as Property Owner/Agent

PRINT NAME \_\_\_\_\_ APPLICANT SIGNATURE \_\_\_\_\_  
TITLE OF SIGNATORY \_\_\_\_\_ DATE \_\_\_\_\_

### THIRD PARTY INSPECTION AGENCY (PIC / Professional - In - Charge)

PRINT AGENCY OR PIC NAME \_\_\_\_\_ AGENT OR PIC SIGNATURE \_\_\_\_\_  
TITLE OF SIGNATORY \_\_\_\_\_ DATE \_\_\_\_\_

CITY OF RICHMOND - FOR OFFICIAL USE ONLY	
ACCEPTED FOR CITY OF RICHMOND	
Staff Name:	Signature:
Title:	Date: