



Structural Observation Program

Designation of Structural Observer

Project Address: _____ Building Permit Number: _____

Description of Work: _____

Owner: _____ Architect: _____ Engineer: _____

Structural Observation (only Checked items are required)			
Firm or Individual to be responsible for the structural observation:			
Name: _____		Phone Number: _____	
Foundation	Wall	Frame	Diaphragm
<input type="checkbox"/> Footings, Stem Walls, Piers	<input type="checkbox"/> Concrete	<input type="checkbox"/> Steel Moment Frame	<input type="checkbox"/> Concrete
<input type="checkbox"/> Mat Foundation	<input type="checkbox"/> Masonry	<input type="checkbox"/> Steel Braced Frame	<input type="checkbox"/> Steel Deck
<input type="checkbox"/> Caisson, Piles, Grade Beams	<input type="checkbox"/> Wood	<input type="checkbox"/> Concrete Moment Frame	<input type="checkbox"/> Wood
<input type="checkbox"/> Retaining Foundations	<input type="checkbox"/> Others:	<input type="checkbox"/> Masonry Wall Frame	<input type="checkbox"/> Others:
<input type="checkbox"/> Others:		<input type="checkbox"/> Heavy Timber Frame	

DECLARATION BY OWNER:

I, the Owner of the project, declare that the above listed firm or individual is hired **by me** to be the Structural Observer.

Signature

Date

DECLARATION BY ARCHITECT OR ENGINEER OF RECORD (required if S.O. is different from the A/E of Record)

I, the Architect or Engineer of Record for the project, declare that the above listed firm or individual is designated by me to be responsible for the Structural Observation.

Signature

Date