

**INSTRUCTIONS:** In compliance with Chapter 17 of the International Building Code, as adopted by the City of Houston, this application shall be completed by the authorized representative of the firm or the supervising licensed professional responsible for special inspections.

The applicant shall identify each individual proposed to perform special inspections and shall demonstrate that each individual has the documented experience necessary to perform the specific special inspections listed on page 2, in accordance with 2021 IBC Section 1704.2.1.

Please complete, sign, & submit this form by email to: [code.development@houstontx.gov](mailto:code.development@houstontx.gov)

**NEW REGISTRATION**       **RENEWAL**       (Existing COH Registration No. \_\_\_\_\_)

1. Name of firm/corporation \_\_\_\_\_

2. Office street address, telephone number and email.

\_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
*Address Phone Number*

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
*City State Zip Code Email*

3. Mailing address (if different from office).

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
*Address City State Zip Code*

4. Minimum requirements – Select each specialty and provide years of experience in table on Page 2.

### REQUIRED SUPPORTING DOCUMENTS

Resume/CV       Copies of Relevant Certifications       P.E. License

**Note:** For renewals, supporting documentation may be requested if not previously submitted or if additional verification is required by the Building Official.

### STATEMENT BY APPLICANT

I have read and understand the special inspection requirements of Chapter 17 of the Houston adopted *International Building Code* and confirm that each special inspector listed on Page 2 meets or exceeds the minimum qualification requirements for each special inspection category as indicated and selected on this application, and all information and documentation provided is true, correct, and complete.

I understand that the Building Official may deny, suspend, or revoke this registration if it is determined that any information provided in this application is false or misleading.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Name	Structural Steel	Structural Steel Welding	Concrete	Masonry	Wood	Soils	Driven Deep Foundations	Wind Resistance	S.F.R.M	Mastic Intumescent Coatings	EIFS	Fire-Stopping	Quality System Auditing
Example: John Doe	5 yrs		5 yrs		5 yrs					5 yrs			

**Other “Special Inspections” Not Listed Above** — For the registration of a special inspection item not listed above, please provide information below for consideration.

Name	Type of Special Inspection	Years of Exp.