



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

SPECIAL INSPECTOR FORM

PROJECT ADDRESS: _____

PROJECT DESCRIPTION: _____

PROJECT OWNER: _____

GENERAL CONTRACTOR: _____

PERMIT # _____ **TELEPHONE #** _____ **EMAIL** _____

NOTE: This completed form must be accompanied by a formal written letter requesting the Special Inspector and/or firm by owner of the project listed above.

FBC 8th Edition Chapter 1, 110.8
SPECIAL INSPECTOR
SECTION 5-2 TOWN OF LOXAHATCHEE GROVES, CODE OF
ORDINANCE CHAPTER 1 FLORIDA BUILDING CODES
ORDINANCE No. 2023-12

- (A) The Special Inspector shall inspect all components of a regulated building system.
- (B) The Inspector shall be a person licensed under Florida Statutes Chapter 468, 471 or 481 as an Inspector in the appropriate category.
- (C) The owner, developer or contractor of such building shall pay all costs of employing a Special Inspector, in addition to all permit fees.

GUIDE LINES FOR SPECIAL INSPECTION

1. Verify soil reports for compliance with design and building code conditions. Transmit reports and certification to the Building Division on a weekly basis.
2. Verify horizontal and vertical location of permitted structure for compliance with the required setbacks and elevations before the placement of concrete. Transmit survey and/or survey certification to Building Division.
3. Perform a visual inspection of all components, which cannot be so inspected after installation.
4. Inspect steel reinforcing prior to concrete placement for proper size, # of bars for required element and tie-offs.
5. Verify that shoring and re-shoring has been certified and is constructed in compliance with the engineered shoring plans.
6. Submit weekly inspection reports of daily inspections.
7. To inspect all structural components of buildings such as, but not necessarily limited to, the following:



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

- A) Foundation system.
- B) All slabs.
- C) Beams and Columns.
- D) All structural walls.
- E) Floor and roof trusses.
- F) Sheathing (structural interior and exterior).
- G) Structural Steel and connections. Welding by a Certified Welder. Provide copy of Certification to the Building Official. Provide reports in a format approved by the Town of Loxahatchee Groves with all required necessary documentation (Surveys, Truss Engineering, Soil Reports, etc) attached to each report for accuracy in processing. Some possible forms are attached. Log sheets are required for Data Entry Tickets for File.

8. To inspect all building systems components such as, but not limited to the following:
A) Electrical Systems, B) Plumbing Systems, C) Mechanical Systems, D) Gas Systems &
E) Special Systems

9. Inspection of non-structural items
Inspect non-structural building components such as:
 Interior non bearing walls
 Insulation
 Drywall
 Fire Rating
 Florida Accessibility Code Requirements
 Florida Fair Housing Code Requirements

10. Violations of Chapter 33 of **Florida Building Code 8th Edition (2023)**, SAFEGUARDS DURING CONSTRUCTION, observed during the normal course of specific inspections shall be reported to the attention of the Building Division as soon as possible.

11. Verify that all materials and methods are in accordance with the approved contract documents concerning areas of inspection responsibility.

12. The special inspector upon completion of the building and prior to the issuance of a Certificate of Occupancy shall file a signed and sealed statement with the Building Division in substantially the following form: To the best of my knowledge and belief, the above described construction complies with the permitted documents and all applicable codes.

Inspection Company _____ Telephone # _____

Address: _____

Architect or Engineer for the Inspection Company (F.S. 481 or 471)

Print Name _____

Signature _____

Reg. # _____

Telephone # _____

Licensed Inspector(s) (F.S. 468)



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

Print Name: _____

Signature: _____

Reg. # _____

Telephone # _____

**STATE OF FLORIDA
COUNTY OF PALM BEACH**

The foregoing instrument was acknowledged before me this _____ by _____, who
Date Name of Person Acknowledging
is personally known to me or who has produced _____ as identification and who did/did not take an oath
Type of I.D.

SEAL

(Signature of person taking acknowledgment)

(Name of officer taking acknowledgment-typed,
printed or stamped)

(Title or Rank)

(Serial number, if any)

Accepted: _____
Building Division Employee

Date: _____

SUPPLEMENTAL SIGNATURES (SPECIAL INSPECTOR FORM)
Licensed Inspector(s) (F.S. 468)

Print Name

Signature

Reg. # _____

Telephone # _____



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

**STATE OF FLORIDA COUNTY
OF PALM BEACH**

The foregoing instrument was acknowledged before me this _____ by _____
Date _____ Name of Person Acknowledging _____
who is personally known to me or who has produced _____ as identification and who did/
Type of I.D. _____
did not take an oath.

SEAL

(Signature of person taking acknowledgment)

(Name of officer taking acknowledgment typed, printed or stamped)

(Title or Rank)

(Serial Number, if any)

Licensed Inspector(s) (F.S. 468)

Print Name

Signature

Reg. # _____

Phone # _____

**STATE OF FLORIDA
COUNTY OF PALM BEACH**

The foregoing instrument was acknowledged before me this _____ by _____
Date _____ Name of person acknowledging _____
who is personally known to me or who has produced _____ as identification and who did/did
Type of I.D. _____
not take an oath.

SEAL

(Signature of person taking acknowledgment)

(Name of officer taking acknowledgment-typed, printed or stamped)

(Title or Rank)

(Serial number, if any)



Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, FL 33470
Phone: 561.807.6675 Fax: 561.793.2420
www.loxahatcheegrovesfl.gov

SPECIAL INSPECTOR FIELD REPORT (SAMPLE)

DATE: _____

TIME: _____

WEATHER: _____

PERMIT NUMBER _____

PROJECT ADDRESS _____

INSPECTION COMPANY _____

PHONE NUMBER _____ **FAX NUMBER** _____

TYPE OF INSPECTION _____ **DATE** _____

INSPECTION RESULTS: _____

CORRECTIVE ACTION (if any) _____

VISITORS TO JOBSITE: _____

Inspector's Name

Inspector's Signature

Inspector's Number
(Building Inspectors, Architects or Engineer)