

Application for Structural Inspection

Submission Ref:		Inspection Date:	
Requested Time <u>ONLY</u> if it is for After Office Hours & Public Holidays:			
Inspection Type : <input type="checkbox"/> Normal [without fee] <input type="checkbox"/> After Office Hours [with fee] <input type="checkbox"/> Public Holidays [with fee]			
Description for Insp.:		Inspection Date:	
Consultant Name		e-mail	
Accredited Engineer Name		Mobile No.	
Contractor Name		e-mail	
Accredited Engineer Name		Mobile No.	
CED Permit/NOC Ref. No.			
Area Name		Plot No.	
Business Unit		Project ID	
Client Name		Client e-mail	
Details of structural element ready for inspection:			
Consultant & Contractor Undertaking			
We the above mentioned project team confirm that above elements have been checked & found comply with following and satisfactory to take all quality of concrete & related work responsibility:			
<ul style="list-style-type: none"> - CED approved drawings. - General conditions mentioned in BP/NOC. - Design Guidelines and Building/General Civil Work Construction Regulations. - Project Specifications. All required tests have been done. - Requested structural element check list completed & available in Site File. 			
Consultant Stamp & Signature		Contractor Stamp & Signature	
We certify that this request is in line with Circular Ref.: 38147/2008/sk Dated 19-Aug.-2008, Ref.: 59000/2011/PR Dated: 21-06-2011, Ref.: CEDGR-21 Dated: 25-01-2016 & all documents for the above elements Check List/Approved Drawing will be available at site for verification.			
TRK CED Inspection Engineer Remarks:			
Inspection Status:	<input type="checkbox"/> APPROVED	<input type="checkbox"/> Comments	
Agreed/Copy Received/Signed By Accredited Consultant/Contractor Engineer			
Contractor Engineer NAME & SIGN	Consultant Engineer NAME & SIGN	TRK CED IE NAME & SIGN	
NOTE: HOIST/PASSENGER LIFT should be provided for the element > G+4 Floors.			