

CITY OF BURBANK

BUILDING & SAFETY DIVISION / COMMUNITY DEVELOPMENT DEPARTMENT

150 N. THIRD ST, BURBANK, CA 91502

T 818-238-5220, F 818-238-5242, Web: www.burbankca.gov

STRUCTURAL OBSERVATION REPORT FORM

STRUCTURAL OBSERVATION means the visual observation of the structural system, for general conformance to the approved plans and specifications, at significant construction stages and at completion of the structural system. Structural observation does not include or waive the responsibility for the inspections required by Section 110, 1701 or other sections of the Code

observation does not include or the Code.	waive the resp	ponsibility for the inspec	tions requ	ired by S	Section 110, 170	01 or othe	r sections of
	Report No.						
This report includes all construc	ction work thro	ough day of _					
Project Address:			Structural Observer of Record (SOR):			SOR Phone No.:	
Building Permit No.:	lo.: Structural Observation performed by:			Observer Professional Lic./Reg. No.:			Phone No.:
OBSERVED STRUCTURAL ELEMENTS AND THEIR CONNECTIONS							
FOUNDATION	WALL	FRAMES	FI	_OOR	PORTION OBSE	ION OBSERVED, IF NOT WHOLE	
☐ Footing, Stem Walls,	□ Concrete	☐ Steel Moment Frame	□ C	oncrete			
☐ Mat Foundation	☐ Masonry	☐ Steel Braced Frame	□ St	eel Deck			
☐ Caisson, Piles, Grade Beams	□ Wood	☐ Concrete Moment Fran	ne 🗆 W	ood			
☐ Retaining Foundation Hillside Special Anchors	□ Other:	☐ Masonry Wall Frame	□ O:	thers:			
□ Others:		□ Others:					
OBSERVED DEFICIENCIES:		RE TRUE TO THE BEST OF	MY KNOWL	FDGE:			
1. I AM THE ENGINEER OR ARCHITECT RETAINED BY THE OWNER TO BE IN RESPONSIBLE CHARGE FOR THE STRUCTURAL OBSERVATION IN ACCORDANCE WITH THE REQUIREMENTS OF THE CITY/COUNTY OF 2. I, OR ANOTHER ENGINEER OR ARCHITECT WHO I HAVE DESIGNATED ABOVE AND IS UNDER MY RESPONSIBLE CHARGE, HAS PERFORMED THE REQUIRED SITE VISITS AT EACH SIGNIFICANT CONSTRUCTION STAGE TO VERIFY IF THE STRUCTURE IS IN GENERAL CONFORMANCE WITH APPROVED PLANS AND SPECIFICATIONS; 3. ALL DEFICIENCIES WHICH REMAIN TO BE CORRECTED HAVE BEEN INDICATED ABOVE; 4. I RECOMMEND THAT ACCEPTANCE OF THE STRUCTURAL SYSTEMS BY THE CITY/COUNTY OF BE WITHHELD UNTIL ALL OBSERVED DEFICIENCIES ARE CORRECTED.							
SIGNATURE	SIGNATURE DATE					F STRUCTU	

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