



Notice of Intent to Use Third Party Inspection Agency

Department of Planning & Development Review, Bureau of Permits and Inspections
900 East Broad Street, Room 108
Richmond, Virginia 23219
Office: (804) 646-4169

<https://www.rva.gov/planning-development-review/permits-and-inspections>

The purpose of this notification is to advise the City of Richmond of the Permit Applicant's intention to utilize third party inspection services in connection with the following construction project. Use a separate form for each Third-Party Agency being used on the project. Rick.Paul@rva.gov

SUBMIT ONLY THIS FORM. NO ATTACHMENTS ARE REQUIRED

Section A – Property Owner/Agent Information

Owner/Agency Name: _____
Street Address: _____ Suite/Room/Unit: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____ Cell Phone: _____ Fax Number: _____
Email Address: _____ Website: _____
Project Name: _____
Project Address: _____

Section B – Primary Third-Party Inspection Agency (List only one third party agency per form)

Third Party Agency: _____ Primary Agency Yes No
City of Richmond Certification Number: _____
Projected/Actual Date of First Inspection: _____
(City of Richmond may conduct audit inspections after the project has begun)

Section C – Permits (List all permits/ permit numbers for the above noted project)

Building _____ Mechanical _____ Fire Alarm _____
 Electrical _____ Sprinkler _____ Gas Piping _____
 Security _____ Plumbing _____ Tank _____
 Others (specify): _____

Section D - Acknowledgements

By submitting this form, I certify that the above statements on this application are true and complete to the best of my knowledge and belief. I agree to comply with all applicable laws and regulations of the City of Richmond. Signature/submission by a Third-Party Agency indicates a contractual relationship between that agency and the building owner. The making of false statements on this application is punishable by law.

Property Owner/Agent (Third Party Agency cannot sign/submit as Property Owner/Agent)

Print Name: _____ Title of Signatory: _____

Applicant Signature: _____ Date: _____

Third Party Inspection Agency (PIC - Professional-In-Charge)

Print Name: _____ Title of Signatory: _____

Signature: _____ Date: _____

CITY OF RICHMOND - FOR OFFICIAL USE ONLY

Accepted for City of Richmond

Staff Name: _____ Signature: _____

Title: _____ Date: _____

Notes: