



# STRUCTURAL INSPECTION REQUEST

## DEVELOPMENT CONTROL FORMS

REQUEST NO

**Project Name:** \_\_\_\_\_

**Project Owner:** \_\_\_\_\_ **Plot No.:** \_\_\_\_\_

**Consultant:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_

**Structural Member:** \_\_\_\_\_ **Drawing No.:** \_\_\_\_\_

### REQUIRED INFORMATION AND SUBMITTALS:

- ✓ Copy of Building Permit (For 1<sup>st</sup> Inspection only)
- ✓ Copy of Demarcation Certificate (For 1<sup>st</sup> Inspection only)
- ✓ Cube Test Results For Preceding Inspected Member (  Yes /  No /  Not Applicable )
- ✓ Vertical Structural Members Checked by Consultant (Undertaking Letter)
- ✓ Attached Marked Sheet For Requested Member

<b>Fee:</b>	AED
<b>Knowledge Tariff:</b>	AED 10
<b>Innovation Tariff:</b>	AED 10
<b>Total:</b>	AED

**FEE:**  
Submission Fee: AED 375 per inspection, Cheque payable to **Dubai Aviation City Corporation**.

The above mentioned structural member was checked by us and found to be consistent with the approved drawings, specifications, building construction workmanship & industrial safety. We undertake that both consultant & contractors engineers shall be available at site throughout the concrete pouring period.

CONTRACTOR	
Name	_____
Contact No.	_____
Email	_____
_____	STAMP
Signature & Date	

CONSULTANT	
Name	_____
Contact No.	_____
Email	_____
_____	STAMP
Signature & Date	

FOR OFFICIAL USE ONLY		
	TN- _____	File: <input type="checkbox"/> DLC <input type="checkbox"/> RC <input type="checkbox"/> AC <input type="checkbox"/> EC <input type="checkbox"/> GC <input type="checkbox"/> MP <input type="checkbox"/> DGC
Received By _____	Signature _____	Date _____
Remarks: _____ _____ _____ _____ _____		
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved With Comments	<input type="checkbox"/> Resubmit

Inspected By  
**Structural Engineer**  
Date :