



BUILDING AND SAFETY DIVISION

505 S. GAREY AVE.
POMONA, CA 91769

Special Inspector's Correction Notice

Permit Number: _____

Project Name/ Address: _____

Inspection Type(s)/Coverage: _____

Continuous

Periodic

Time inspections Began: _____ Time Inspection Ended: _____

List items requiring correction, correction of previously listed items, and previously listed uncorrected items:

Comments:

Signed: _____ Date: _____

Print Full Name: _____ City I.D. Number: _____

Note: This report is to remain at the job site with the Contractor for review by the City's Building Inspector.