



**Construction Materials Testing/
Inspection Laboratory Final Report**

Inspection Office: (858)492-5070

Email completed form to: DSD-Sp-Insp-Reports@sandiego.gov

**To: Building Official, City of San Diego
Development Services Department, Inspection Office**

Date: _____

Subject: Satisfactory Completion of Work Requiring Construction Materials Testing/Inspection

Permit/Approval No. _____ Project No. _____

Project Address: _____

Identify the materials tested/inspections performed: _____

The construction materials testing/inspection was performed by:

Name of Testing Laboratory: _____

_____ Address _____ City _____ State _____ Zip Code _____

Name of Responsible Managing Engineer of the Testing Laboratory:

_____ First Name _____ Last Name _____ M.I. _____

State of California Registration Number: _____

Expiration Date: _____

I declare under penalty of perjury that to the best of my knowledge, all work requiring special inspection and/or material sampling and testing for the structure(s) constructed under the permit are in conformance with the approved plans and construction documents, the approved inspection and testing program, and the applicable workmanship provisions of the California Building Code as amended by the City of San Diego.

Executed on This Date: _____

Signature: _____
(Responsible Managing Civil Engineer)

***Engineer's Stamp →**

Phone Number: _____

Email: _____

