

## SPECIAL INSPECTOR EXAMINATION APPLICATION

**Please select one of the following:**

- \$100.00 MASONRY EXAM APPLICATION FEE (nonrefundable)
- \$475.00 SHOTCRETE APPLICATION AND EXAM FEE (nonrefundable)
- \$490.00 GLULAM APPLICAN AND EXAM FEE (nonrefundable)

MAKE CHECK PAYABLE TO: "DSA SPECIAL INSPECTOR EXAM"

**Mail application, DSA 650 and the appropriate fee to the DSA Inspector Program, 1102 Q Street, Suite 5100, Sacramento, CA 95814**

APPLICANT NAME: \_\_\_\_\_  
Last First M.I.

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_  
Day Cell Home

DATE OF BIRTH (*Must be at least 25 years of age*): \_\_\_\_\_ Email: \_\_\_\_\_

**ICC STRUCTURAL MASONRY SPECIAL CERTIFICATION #** (Masonry Applicants): \_\_\_\_\_

**ICC REINFORCED CONCRETE SPECIAL CERTIFICATION #** (Masonry Applicants): \_\_\_\_\_

<b>WORK HISTORY:</b> Three years of pertinent experience required for new applicants; not required for renewals. (See Web page for instructions. Attach additional pages if necessary.)				
PROJECT NAME / DESCRIPTION <small>(Cost, # of Stories, Square Footage, DSA or OSHPD File &amp; Application # if applicable)</small>	FROM <small>(Mo. / Yr.)</small>	TO <small>(Mo. / Yr.)</small>	DUTIES PERFORMED	EMPLOYER <small>(Name and Phone #)</small>
				Name: Phone:

### CURRENT EMPLOYER INFORMATION

Laboratory Name: \_\_\_\_\_ LEA #: \_\_\_\_\_

Engineering Manager: \_\_\_\_\_

Contact #: \_\_\_\_\_ Email: \_\_\_\_\_

I certify under penalty of perjury that all information entered on this application is true and complete. I further understand that any false, incomplete, or incorrect statements may be cause for voiding this application and any subsequent certification. I authorize the employers identified on this application to release any information they may have concerning my employment, to the State of California. I further certify that I will not reveal the contents of the examination to anyone and affirm that I will abide by the rules of the examination. I understand that upon certification, my name and phone number will be available to the public and posted on the Internet.

\_\_\_\_\_  
 APPLICANT SIGNATURE

\_\_\_\_\_  
 DATE SIGNED