

APPLICATION FOR SPECIAL INSPECTOR OF THRESHOLD BUILDINGS LIMITED CERTIFICATION

2400 Mahan Drive Tallahassee, FL -32308

Fee: to include Application Fee; Special Inspector
Limited/Restoration Certification fee and
Unlicensed Activity fee.
Refer to Rule 61G15-24.001, Schedule of Fees
(Checks Should be Made Payable to FBPE)

NAME	Last:			First:		Middle:	
MAILING ADDRESS	Number and	Street:		<u> </u>		Apt/Lot No.:	
	City:		State:		Zip C	Code:	County:
HOME TELEPHONE NUMBER:		BUSINESS TE NUMBER:	LEPHON	ΙE		FLORIDA PROFESS NUMBER:	SIONAL ENGINEER
EMAIL ADDRESS:		1		*SOCIAL SECUR	ITY N	IO.:	
*Do you wish to receive corresponden All email addresses are public records			11(12).	States Code, Sec	ctions	bers are mandatory pur 653 and 654; and Sect 7, and 409.2598, Florid	suant to Title 42 United ions 455.203(9), a Statutes.

61G15-35.003 Qualification Program for Special Inspectors of Threshold Buildings and Special Inspectors of Threshold Buildings (Limited).

(2) Special Inspectors of Threshold Buildings (Limited)

To implement section 553.79, F.S., the Board hereby establishes the certification of Special Inspectors of Threshold Buildings (Limited), also referred to as "Special Inspectors (Limited)" or "S.I. (Limited)." Any licensee holding this certification may serve as the Special Inspector / Threshold Building Inspector for any project involving the Repair (without Substantial Structural Damage), Alterations 1, Alterations 2, and Alterations 3 (without Substantial Structural Alterations) of an existing Threshold Building when such project does not involve new construction or existing Threshold Buildings with Repairs with Substantial Structural Damage or Alterations 3 with Substantial Structural Alteration, as defined in the Florida Building Code - Existing Buildings. Licensees who wish to serve as Special Inspectors for new construction, or existing Threshold Buildings with Repairs with Substantial Structural Damage or Alterations 3 with Substantial Structural Alteration must be certified pursuant to subsection (1), .

- (b) The minimum qualifying criteria for Threshold Inspectors (Limited) are established by the Board to be as follows:
- 1. Three (3) years of experience in performing structural field inspections on Threshold Buildings, components thereof, or equivalent pursuant to a threshold/special inspection plan relevant to the work performed and two (2) years of experience in the structural design of repairs to components of threshold buildings. For the purpose of these criteria, examples of structural components include, but are not limited to, prestressed or post-tensioned concrete, balconies, exterior walls, etc. or
- 2.(a) Licensed professional engineers whose principal practice is structural field inspections shall have five (5) years of experience in performing structural field inspections on Threshold Buildings or equivalent pursuant to a threshold/special inspection plan relevant to the work performed; and
- (b) The Applicant must possess each of the certifications identified in paragraph 61G15-35.004(2)(f), F.A.C., at the time of application.

Use one form for Structural Field Inspection experience and one form for Structural Design of Repairs to Components of Threshold Buildings.

Structural Design experience is for repairs of existing specific structural components of threshold buildings, such as foundations, prestressed or post-tensioned concrete, balconies, windows/doors, etc., as well as the design of new threshold buildings. List the type of project and the occupancy. Identify features that qualify the design as repair of components of a threshold-type building or the scope of the inspection, the number of months of experience claimed for this project, and the name and license number of the structural engineer of record for this project. List the experience chronologically, starting with the earliest.

Field inspection experience is only recognized for projects where the field inspections are of complete threshold buildings and can include the specific structural components, such as foundations, prestressed or post-tensioned concrete, etc. List the type of project and the occupancy. Identify features that qualify the design as a threshold-type building, the scope of the inspection, the number of months of experience claimed for this project, and the name and license number of the special inspector of record for this project. List the experience chronologically, starting with the earliest.

QUALIFICATION SECTION OF SPECIAL INSPECTOR LIMITED APPLICATION Please use a separate form for each Structural Design project

The Structural Engineer of Record, hereinafter referred to as "Verifier" [in the event if the applicant is the Structural Engineer of Record, then a supervisor or colleague] must verify each work experience. Each form must be signed and sealed by the Verifier. The original form must be sent to the Verifier and a copy sent to FBPE with your application. Verifications shall be sent to FBPE directly by the Verifier. SELF-VERIFICATION IS NOT PERMITTED.

verifications shall be sent to FBPE directly by the verifier.	SELF-VERIFICATION	I IS NOT PERIVITIED	•	
Submitted for: Structural Design Experience: #earliest.)	(List the expe	rience chronologio	cally, starting with the	
Project identification and location (street address, city, and state)				
2. Occupancy type(s).				
Identify features that will qualify the design as a threshold type building (See definition contained in the General Information included with this application.)	Total Area: No. of stories: Height: Assembly area: Occupant content	::	SF ft (SF) if applicable (Persons) if app.	
4. Description of <u>structural components or</u> <u>repairs/replacements</u> <u>structural systems designed</u> by applicant.				
5. Was the structural inspection plan part of the permit package?	Yes	_ No		
6. Number of months experience claimed for this project.	Start Mo/Year	End Mo/Year	Total Months	
7. Name, license number, and state of issuance of Verifier. (Please note: this should be someone other than the applicant)				
I am a professional engineer currently licensed in the State of Florida and my principal practice is in structural engineering or structural field inspections. I hereby certify that the above statements are true and correct and that I have the technical competency to perform structural inspection on threshold type buildings as required by Section 553.79(5)(a), Florida Statutes.	I practice is in structural engineering tions. I hereby certify that the above correct and that I have the technical structural inspection on threshold have verified the above on structural inspection on threshold have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge project and have verified the above of I was a supervisor direct knowledge.	d the above statement pervisor/colleague of vledge of the applica	ral Engineer of record for this project and above statements are true and correct. or/colleague of the applicant and have of the applicant's involvement in the verified the above statements are true and	
Applicant Signature, PE Number, date, and seal here	Verifying E	ngineer' Signature, PE and seal here	Number, date,	

QUALIFICATION SECTION OF SPECIAL INSPECTOR LIMITED APPLICATION Please use a separate form for each Structural Field Inspection project

The Special Inspector of Threshold Buildings for the project listed below, hereinafter referred to as "Verifier" must verify the work experience listed on this page. Each form must be signed and sealed by the Verifier. The original form must be sent to the Verifier and a copy sent to FBPE with your application. Verifications shall be sent to FBPE directly by the Verifier. SELE-VERIFICATION IS NOT PERMITTED.

SELF-VERIFICATION IS NOT PERMITTED.			, ,
Submitted for: Field Inspection Experience #the earliest.)	(List the ex	xperience chronologi	cally, starting with
Project identification (street address, city, and state)			
2. Occupancy type(s).			
Identify features that will qualify the threshold building. (See definition contained in the General Information included with this application.)	Total Area: No. of stories: Height: Assembly area: Occupant content:		SF ft (SF) if applicable (Persons) if app.
4. Scope of field inspection by applicant.			
5. Was the inspection performed pursuant to the permitted structural inspection plan?	YesN	lo	
6. Number of months experience claimed for this project.	Start Month/Year	End Month/Year	Total Months
7. Name, license number and state of issuance of Special Inspector of Threshold Buildings for the project.			
I am a professional engineer currently licensed in the State of Florida and my principal practice is in structural engineering or structural field inspections. I hereby certify that the above statements are true and correct and that I have the technical competency to perform structural inspection on threshold type buildings as required by Section 553.79(5)(a), Florida Statutes.	project and have verificorrect.	ector of Threshold Build ed the above statements e, PE Number, SI Numbe and seal here	are true and

FLORIDA BOARD OF PROFESSIONAL ENGINEERS

LETTER OF RECOMMENDATION FOR SPECIAL INSPECTOR LIMITED CERTIFICATION

Name of Applicant	PE#	Name of Person Completing Form	PE #
			SI#
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Telephone No.			
•	ation for certificat	ence:ence:ence:ence:ence:ence:ence:ence:ence:ence:_enc	• •
field inspections and h	as gained exper	to cant has worked as a structural engineer or perience in the area of inspection of Threshold Egineering work as it relates to threshold type	Buildings.
A. Experience:			
B. Ability:			
C. Competency:			
(SE	AL)	Signature	 Date Signed