

CONFIDENTIAL OF CONCEDUCTION FIFE D. DEVIEW					
		N OF CONSTRUCTION FIELD REVIEW ompleted for each required discipline/service provider)			Form C
Project	Description:	ompleted for each required di	scipilie/servic	Le provider)	
Project Address:					
Permit Number:					
In accordance with Form B, I declare that:					
I am the Professional and/or Service Provider who completed Form B: Field Review Commitment					
Form for the discipline as identified below, or the successor to the Professional and/or Service					
Provider who completed the form;					
 Field reviews for this discipline, at intervals appropriate to the stages of construction, were conducted for the duration of construction; 					
 The construction is in general conformance with the plans and other documents that formed the 					
basis for the issuance of the building permit(s);					
All approved changes during construction conform to the requirements of the currently adopted					
National Building Code and/or National Energy Code, or any other applicable standard; and					
The project is now ready for its intended use.					
Check Where	Discipline (if other,	must identify the	<u>Profession</u>	nal or Service Provide	<u>er</u>
applicable	discipline)				
	Geotechnical Design				
	Architectural Design				
	Structural Design				
	Mechanical Design – plumbing				
	Mechanical Design – HVAC				
	Mechanical Design – Fire suppression				
	Electrical Design				
	Registered Interior Designer				
	Other -				
This schedule shall be submitted to the OneStop Development Shop or assigned Building Inspector					
within 5 working days of the project's substantial completion and prior to the occupancy of the building					
or use of the structure.					
Professional or				Professional S	Seal &
Service Provider:				Signature:	
Company Name:					
Mailing Address:					
Contact number:					
Email Address:					
Date:					