



THIRD-PARTY INSPECTOR – PREAPPROVAL FORM
CITY OF WAYNESBORO, BUILDING & ZONING DEPARTMENT

A.) APPLICANT INFORMATION:

Applicant Name: \_\_\_\_\_ (Printed)
Mailing Address: \_\_\_\_\_ (Printed)
Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

B.) TYPE OF INSPECTION(S)

COMMERCIAL: [ ] building [ ] electrical [ ] mechanical [ ] plumbing [ ] other \_\_\_\_\_

RESIDENTIAL: [ ] building [ ] electrical [ ] mechanical [ ] plumbing [ ] other \_\_\_\_\_

Certification: \_\_\_\_\_

\* submit valid certification(s)

C.) SIGNATURE:

AFFIDAVIT: I have reviewed the City of Waynesboro’s written THIRD-PARTY INSPECTION POLICY, and I hereby certify that I meet the minimum qualifications of and shall perform third-party inspections in full compliance with that policy.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Phone Number \_\_\_\_\_

FOR OFFICE USE ONLY:

Form area for office use containing fields for Date Rec'd, Not approved/Approved checkboxes, Building & Zoning Department, and Approved for sections for Commercial and Residential with checkboxes for building, electrical, mechanical, plumbing, and other.