



Clark County Department of Building & Fire Prevention

4701 West Russell Road, Las Vegas, NV 89118 ~ (702) 455-3000

Inspection Division

Designated Residential Inspection Services

Jerome A. Stueve, P.E., Director

Samuel D. Palmer P.E., Assistant Director • James Gerren P.E., Assistant Director • Girard W. Page, Fire Marshal

I am requesting approval from the Department of Building-Inspection Division (CCBD) to allow an approved Residential Inspection Agency (RIA) to perform required inspections on behalf of Clark County Department of Building-Inspection Division (CCBD) on the following project:

Part A (To Be Completed by the Developer)

Request Number: _____

Estimated Cost: _____

Project Name and Phase: _____

Phase/Unit: _____ Blocks: _____ Total Units: _____ Total Models: _____ Special Inspection:

Project Address: _____

Developer: _____ Developer's Representative: _____

Developer's Representative Contact Information: Phone: _____ Fax: _____ E-Mail: _____

I agree to engage the designated RIA to perform required inspections. I am responsible for scheduling all required inspections between all subcontractors and the designated RIA, and where required, I will also schedule other required inspections with CCBD. I further understand that failure to schedule all required inspections and/or failure of the RIA to perform all required inspections may result in a Stop Work Order issued by CCBD.

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Developer's Signature: _____ Request Date: _____

NOTICE TO THE DEVELOPER: CCBD will review and either approve or disapprove your request based on the nature of the project in question. If this request is approved, CCBD will designate an RIA to perform inspections on behalf of CCBD. The designated RIA will be identified on a Quality Assurance Agency Single Family Residential Inspection Agreement. The designated RIA may not be changed without prior approval from CCBD. Please note that CCBD will perform foundation, framing and final inspections in addition to those performed by the designated RIA. If the request is disapproved, reason(s) for disapproval will be provided below.

Part B (To Be Completed by Clark County)

Request to utilize the services of an approved RIA is approved: (Box Checked)

Reason(s) for Disapproval: (Box is Unchecked) _____

Prepared By: _____ Date Approved: _____ QAA Selected _____ RIAQM/EM

Designated Residential Inspection Agency: _____

TO BE COMPLETED BY PAC/PLANS EXAMINATION: If Developer Opted Out, please check this box and return form to Inspections Office.

Part C (To Be Completed by the Residential Inspection Agency)

In order to designate the selected agency on the Quality Assurance Agency Residential Inspection Agreement (QAA-RIA), the agency's designated Quality Manager or the designated Engineering Manager must sign and fax back to CCBD Inspections Division @ 221-0630, Attn.: Residential Inspection Program.

Quality Manager's (QM): _____ QM's Signature: _____

Engineering Manager's (EM): _____ EM's Signature: _____

Request Number: _____ Estimated Cost: _____