## NORTH CAROLINA CODE OFFICIALS QUALIFICATION BOARD

1202 Mail Service Center Raleigh, NC 27699-1202

Phone (919) 647-0000 / Fax (919) 715-0067

## **Letter of Technical Supervision**

**Board Rule 11 NCAC 08.0706(b)** 

Name of Applicant		Applicant ID #:
Technical Area(s) Supervised:	Building Mechanical	☐ Electrical ☐ Plumbing ☐ Fire
Begin Supervision Date:	1	End Supervision Date:
Projects Inspected/Installed/Des	igned Under Supervision	
Project Name :		Permit Number :
Building Floor Area:	Number of Stories:	Occupancy Classification:
	_	al Electrical Plumbing Fire
Project Name :		Permit Number :
Building Floor Area:	Number of Stories:	Occupancy Classification:
Technical Area(s) Performed:	☐ Building ☐ Mechanica	al Electrical Plumbing Fire
Comments:		
D. C. AV		
		Permit Number :
Building Floor Area:	Number of Stories:	Occupancy Classification:
Technical Area(s) Performed:	☐ Building ☐ Mechanica	al Electrical Plumbing Fire
Comments:		

(You may attach additional sheets if necessary, to list additional inspections completed under your technical supervision.)

	end that upon satisfaction of o  Inspector, Level	supervision for the time period and on the prother required qualifications this applicant be	
Signature		Date:	
Typed Name		ID#:	
Professional certification, regis	tration or inspection certification	held by Supervisor.	
STATE OF NORTH CAROLINA			
COUNTY OF		_	
The above named certifying city and says that the above statemer	or county official personally appear to it is true and correct.	eared before me on this day who, being duly sworn, d	leposes
This, the	day of	, 20	
Signature and Printed Name of I	Notary Public	(Seal)	
My commission expires		- ·	

This form is to be submitted electronically with the Standard Application for the applicant named above.