

**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: \_\_\_\_\_ End Supervision Date: \_\_\_\_\_

Projects Inspected/Installed/Designed Under Supervision

Project Name : \_\_\_\_\_ Permit Number : \_\_\_\_\_

Building Floor Area: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Technical Area(s) Performed:  Building  Mechanical  Electrical  Plumbing  Fire

Comments: \_\_\_\_\_

Project Name : \_\_\_\_\_ Permit Number : \_\_\_\_\_

Building Floor Area: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Technical Area(s) Performed:  Building  Mechanical  Electrical  Plumbing  Fire

Comments: \_\_\_\_\_

Project Name : \_\_\_\_\_ Permit Number : \_\_\_\_\_

Building Floor Area: \_\_\_\_\_ Number of Stories: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Technical Area(s) Performed:  Building  Mechanical  Electrical  Plumbing  Fire

Comments: \_\_\_\_\_

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

Additional Comments about Applicant: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The above named applicant has worked under my direct supervision for the period and on the projects indicated above. I recommend that upon satisfaction of other required qualifications this applicant be certified as a :**

\_\_\_\_\_  
(Technical Area) Inspector, Level \_\_\_\_\_  
(I, II, or III)

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Typed Name \_\_\_\_\_

ID # : \_\_\_\_\_

\_\_\_\_\_  
Professional certification, registration or inspection certification held by Supervisor.

STATE OF NORTH CAROLINA

COUNTY OF \_\_\_\_\_

The above named certifying city or county official personally appeared before me on this day who, being duly sworn, deposes and says that the above statement is true and correct.

This, the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

(Seal)

\_\_\_\_\_  
Signature and Printed Name of Notary Public

My commission expires \_\_\_\_\_.

**Submit this form electronically with the Standard Certificate application.**