DSA

102-IC

CONSTRUCTION START NOTICE/INSPECTION CARD REQUEST

This form has been completed by the ☐ **Architect/Engineer** in general responsible charge of the project, or by the ☐ **School District**, in accordance with California Code of Regulations, Title 24, Part 1, Section 4-331, and submitted to DSA.

DSA Use Only *(Date Cards Issued by DSA)*:	Number of Cards Issued:	Issued By:

1. GENERAL INFORMATION

School District/State Agency:	DSA File #: -
School Name:	DSA App. #: -
Project Name:	CDS #:
Submitted By:	Submittal Date:
Email:	Construction Start Date:
Phone:	Number of attached pages:
1. Total construction contract amount: (*Exclude allowances/contingencies*)	
2. Total construction management amount:	
3. Project cost: *(Sum of lines 1 and 2)*	

For initial submittal, complete Sections 1 through 6, or

☐ Check this box if amending the original or previously submitted DSA 102-IC and enter only the amending information in applicable sections. *(Note: Additional inspection cards must be requested or a new DSA 102-IC submitted, with the new date.)*

2. SCOPE OF WORK FOR THIS CONSTRUCTION PROJECT – AGGREGATE SCOPE OF ALL CONTRACTS

☐ a. Check this box if the scope of work includes any site work, including non-building site structures.

☐ b. Check this box if the scope of work includes any buildings, and list each building's unique identifiers (numbers, letters or names), as identified on the DSA 153: *(Do not list non-building site structures here. See DSA procedure PR 13-01 for definition.)*

☐ c. Check this box if there is a scope of work shown on the DSA-approved plans or on the DSA project application that is not included in items a. or b. above: *(List building numbers, letters or names; for site work/non-building site structures, provide a brief description below.)*

Project Phasing: Will the items indicated above be in future phase(s)? ☐ Yes ☐ No Number of anticipated phases?

3. FIRE AND LIFE SAFETY

The owner or owner's authorized agent is required to develop a written Site Safety Plan (SSP) that includes the information outlined in California Building Code (CBC) Section 3302, California Fire Code (CFC) Section 3303, and California Existing Building Code (CEBC) Section 1502. DSA requires the completed SSP to be submitted to DSA and provided to the Local Fire Authority (LFA) prior to the start of construction. Check <u>one</u> of the following boxes:

☐ a. The SSP is submitted to DSA concurrently with the DSA 102-IC and it is acknowledged that the SSP has been, or will be, provided to the LFA, in accordance with their policies and procedures, prior to the start of construction.

☐ b. The SSP is not required to be submitted to DSA; this is an amended DSA 102-IC or the scope of work associated with this DSA 102-IC is limited to in-plant construction only and the building is not placed on a school site.

4. PROJECT DELIVERY METHOD

☐ Design/Bid/Build ☐ Lease-Lease Back ☐ CM at Risk

☐ Design Build ☐ CM Multi-Prime ☐ Owner Builder

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5. LISTING OF PROJECT PARTICIPANTS

List primary collaborators of designated tracks in DSAbox:			
District/Owner:	Contact Name:		
Title:	Email:		Phone #:
Design Professional in General Responsible Charge: *(Firm Name)*			
Name:	Email:		License #:
			Phone #:
Name:	Email:		License #:
			Phone #:
Project Inspector:	DSA 5-PI Approval Date:		Phone #:
Email:	DSA Certification #:		
In-Plant Inspector:	DSA 5-IPI Approval Date:		Phone #:
Email:	DSA Certification #:		
General Contractor: *(Firm Name)*			License #:
Name:	Email:		Phone #:
Laboratory of Record – Tests & Special Inspections:		LEA#:	Phone #:
Engineering Manager:	Email:		License #:
Laboratory of Record – Soils & Foundations:		LEA #:	Phone #:
Engineering Manager:	Email:		License #:
Geotechnical Engineer:	Email:		License #:
Geotechnical Engineer is hired by: Laboratory of Record ☐ District/Owner ☐			

6. LISTING OF PROJECT COLLABORATORS FOR DSABOX PERMISSIONS

Design Professional with delegated responsibility requiring separate folders with *Viewer/Uploader* permission: *(Verification of DSA 1-DEL required.)*		
Discipline:		License #:
Name:	Email:	Phone #:
Discipline:		License #:
Name:	Email:	Phone #:
Design Professional with delegated responsibility with *Viewer* permission in project folder: *(Verification of DSA 1 required.)*		
Structural Engineer: *(Firm Name)*		
Name:	Email:	License #:
		Phone #:
Name:	Email:	License #:
		Phone #:
Mechanical Engineer: *(Firm Name)*		
Name:	Email:	License #:
		Phone #:
Name:	Email:	License #:
		Phone #:
Electrical Engineer: *(Firm Name)*		
Name:	Email:	License #:
		Phone #:
Name:	Email:	License #:
		Phone #:
Architect or Structural Engineer responsible for design of relocatables or modular buildings: *(List each firm if multiple manufacturers.)*		
Architect or Structural Engineer: *(Firm Name)*		
Name:	Email:	License #:
		Phone #:
Name:	Email:	License #:
		Phone #:

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Architect or Structural Engineer responsible for observation of in-plant construction of relocatables or modular buildings: *(List each firm if multiple manufacturers.)*		
Architect or Structural Engineer: *(Firm Name)*		
Name:	Email:	License #: Phone #:
Name:	Email:	License #: Phone #:

Architect or Structural Engineer responsible for observation of site construction of relocatables or modular buildings: *(List each firm if multiple manufacturers.)*		
Architect or Structural Engineer: *(Firm Name)*		
Name:	Email:	License #: Phone #:
Name:	Email:	License #: Phone #:

Architect/Engineer project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

School District/Owner project folder collaborators: *(Includes CM Multi-Prime, Facilities and Program Managers, if applicable.)*		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

Project Inspector project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

Laboratory of Record – Geotechnical project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

Laboratory of Record – Tests & Special Inspections project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

General Contractor project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐
Name:	Email:	☐	☐	☐

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Prime Contractors requiring separate folders with Viewer/Uploader permission: *(Used with CM Multi-Prime project delivery.)*		
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
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Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:
Company:		License #:
Name:	Email:	Phone #:

Special Inspectors NOT employed by the Laboratory of Record (LOR): *(List individually. Separate folders will be created under the School District for each Special Inspector. Do not complete this section if the Special Inspector is employed by the LOR. See Section 4.)*		
Name:	Certification #: *(if applicable)*	
Discipline:	Email:	Phone #:
Name:	Certification #: *(if applicable)*	
Discipline:	Email:	Phone #:
Name:	Certification #: *(if applicable)*	
Discipline:	Email:	Phone #:
Name:	Certification #: *(if applicable)*	
Discipline:	Email:	Phone #:

Request for additional project folder collaborators:		**PERMISSION LEVEL**		
		View	View/Upload	Remove
Name:	Email:	☐	☐	☐
Phone #:	Folder			
Name:	Email:	☐	☐	☐
Phone #:	Folder			
Name:	Email:	☐	☐	☐
Phone #:	Folder			
Name:	Email:	☐	☐	☐
Phone #:	Folder			
Name:	Email:	☐	☐	☐
Phone #:	Folder			
Name:	Email:	☐	☐	☐
Phone #:	Folder			

Submit this form electronically to the DSA Regional Office with construction oversight authority for this project:

☐ DSA Oakland Oakfielddocs@dgs.ca.gov	☐ DSA Sacramento Sacfielddocs@dgs.ca.gov	☐ DSA Los Angeles LAfielddocs@dgs.ca.gov	☐ DSA San Diego SDfielddocs@dgs.ca.gov