



THIRD PARTY INSPECTION DECLARATION OF COMPLIANCE AND LIABILITY
HOME BACKUP POWER SYSTEM

SYSTEM TYPE: PHOTOVOLTAIC ☐ BATTERY ☐ GENERATOR ☐ OTHER ☐

Permit Address:

Third Party Inspector Information

Inspector Name:		
Company Name:		
Address:		
City	State:	Zip:
Phone:	E-Mail:	
License / Certification Number:		

CERTIFYING COMPLIANCE WITH SAGINAW CODES / ORDINANCES:

_____ (Initial) I certify that I have inspected the home backup power installation associated with the project above in accordance with all applicable laws, codes, ordinances, and standards adopted by the City of Saginaw and the State of Texas and that my findings are true and correct. Additionally, I certify that all deficiencies (if any) noted during the inspection have been corrected and there are no deviations, deficiencies, or unresolved items under the scope of this permit.

_____ (Initial) I certify that interconnected smoke and carbon monoxide detectors are installed as required by the IRC and have been tested and verified to be in working order at the time of inspection.

LIABILITY ACKNOWLEDGEMENT:

_____ (Initial) I understand and acknowledge that the City of Saginaw is NOT LIABLE for third party inspections and that I am personally liable for damages resulting from any negligent acts or omissions in conducting this inspection.

THIRD INSPECTOR DECLARATION:

I declare that I completed the inspection for the home backup power installation described above and have provided the required inspection documents and comments created as part of my inspection. I acknowledge the home backup power installation may not be placed into service until the City of Saginaw has issued a permit.

Signature

Date