****

**Cayman Islands Government**

**Department of Planning**

**Third-Party Building Inspection**

**Notice of Intent**

**By initialing and signing the following, I understand and agrees to each of the following:**

\_\_\_\_\_\_ I understand that additional inspections will still be required from the Department of Planning.

\_\_\_\_\_\_ I understand and agree that the Department of Planning fees may not be waived or reduced as a result of my choice to retain a third-party building inspector for this permit application. I understand I will be responsible to pay the third-party building inspection agency for their service directly.

\_\_\_\_\_\_ I understand building inspection and subsequent reinspections will be conducted by the same third-party Building Inspection agency; I will be responsible to pay the third-party Building Inspection agency for their service directly.

\_\_\_\_\_\_ I understand and agree this application is elective and purely voluntary, and by choosing to participate in this alternative Building Inspection process I agree that Neither the Governor, any member of Cabinet, the Authority nor the Director shall be liable in damages for anything done or omitted in the discharge or purported discharge of their respective functions and these regulations unless it is shown that the act or omission was in bad faith.

**By my signature below, I affirm that I have read, understand and agree to the provisions of**

**this application and the Third-Party Building Inspection Program:**

Signature (Owner) Date

****

**Cayman Islands Government**

**Department of Planning**

**Third-Party Building Inspection**

**Notice of Intent**

**Please complete and return to the Department of Planning. One form required per project.**

**Owner Information**

Owner/s Name:

Address:

Phone No.: Email:

**Project Information**

Project:

Location: Block: Parcel Number:

Project description:

Planning Approval #:

I/We intend to employ the agency listed below to provide Third-Party Building Inspection of the following diciplines for this project.

**Building Mechanical Plumbing**

Agency E-mail

Signature (Owner) Date

**Official Use Only**

Date Received

 Approved Disapproved

Reason for Disapproval:

 For Haroon Pandohie

 Director of Planning