



MARTIN COUNTY BUILDING DEPARTMENT  
900 SE RUHNKE STREET  
STUART, FL 34994  
(772) 288-5916  
permitting@martin.fl.us  
Text: 202-937-0892

**FORM C-98**

PERMIT NUMBER: \_\_\_\_\_

CONSTRUCTION ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, agree to perform the following inspection(s) and certify compliance with the Florida Building Code 8th Edition (2023), A.S.C.E. 7-20 and any other applicable codes, whichever is applicable for those items inspected.

**Inspection reports to be submitted as soon as inspections are performed.**

Place an (X) next to the inspection performed.

- |       |  |
|-------|--|
| _____ | 1) Footer and Slab                           |
| _____ | 2) Tie Beam and Columns                      |
| _____ | 3) Framing – including shear walls & trusses |
| _____ | 4) Connectors and Straps                     |
| _____ | 5) Nailing & Sheathing                       |
| _____ | 6) Concrete Restoration                      |
| _____ | 7) Other _____                               |

\_\_\_\_\_  
ENGINEER'S NAME (PRINT)

\_\_\_\_\_  
OWNER'S NAME (PRINT)

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
OWNER'S SIGNATURE

\_\_\_\_\_  
TELEPHONE NUMBER

SEAL/SIGNATURE

**THIS CERTIFICATION MUST BE SUBMITTED WITH APPLICATION.**

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**FORM C-99**  
**(FINAL INSPECTION)**

PERMIT NUMBER: \_\_\_\_\_

CONSTRUCTION ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, have performed the final inspection(s) on the following items and certify compliance with the Florida Building Code 8th Edition (2023), A.S.C.E. 7-20 and any other applicable codes, whichever is applicable for those items inspected.

**Inspection reports to be submitted as soon as inspections are performed.**

Place an (X) next to the final inspection performed.

- |       |  |
|-------|--|
| _____ | 1) Footer and Slab                           |
| _____ | 2) Tie Beam and Columns                      |
| _____ | 3) Framing – including shear walls & trusses |
| _____ | 4) Connectors and Straps                     |
| _____ | 5) Nailing & Sheathing                       |
| _____ | 6) Concrete Restoration                      |
| _____ | 7) Other _____                               |

\_\_\_\_\_  
ENGINEER'S NAME (PRINT)

\_\_\_\_\_  
TELEPHONE NUMBER

SEAL/SIGNATURE

**THIS CERTIFICATION MUST BE SUBMITTED WITH ALL INSPECTION REPORTS BEFORE  
FINAL INSPECTION BY MARTIN COUNTY.**

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