



City of Elko

Building Department
1753 College Avenue
Elko, Nevada 89801
(775) 777-7220 fax (775) 777-7229

Structure Placement Certification

One Certification for Each Address

Permit # _____ **Date** _____

Address _____

I hereby acknowledge that I have reviewed the approved plans and have observed the site conditions at the time of the excavation for footings, and attest that the site layout and the structure placement conforms to the most current City of Elko approved site plan, as applicable.

Developer/Contractor

Signature _____ License # _____

Print Name as stated above _____

Title _____

Company Name _____

A Nevada Registered Engineer Firm, when applicable must complete this section.

I hereby acknowledge that I have reviewed the approved plans and have observed the site conditions at the time of the excavation for footings, and attest that the site layout and the structure placement conforms to the most current City of Elko approved site plan, as applicable.

Engineering
Company Name _____

Affix, Seal, Sign and Date

Return completed certification to the Building Inspector for your project.