

	Intermed	Intermediate Inspection Application form					
(time、	Construction \sim	Construction)				
		(First page)					

	· <u></u>	_ (First	page)			·
Since the prescribed work ha the items described in this ap					e inspectior	n. Regarding to this,
Dear URATA(CAMBODIA)., LT	ī D					
Construction owner	Company name:			Stamp		
	Address:					
	Telephone:					
	Person name:			Signature		
There are no discrepancies in	the contents of p	page 3 as des	scribed in the	attached sheet.		
Construction management	Company name:			Stamp		
	Address :					
	Telephone :					
	Person name:		Signature :			
Project name						
Construction Permit license		Obtained date		N	lo l	
Construction Site Opening Lic	ense	Obtained date		N	lo lo	
Plan change		Obtained date		N	lo	
Schedule of inspection dat	e: /	/	• Inspec	tion time:		~
Reception date : /	/ /		Reception N	lo. : U C- 2022 -		
Recipient :						

(Second pages)

	· · · · · · · · · · · · · · · · · · ·				
1、Contractor		2, Representative designer (Architecture)			
License name		License name			
Obtained date		Obtained date			
License No.		License No.			
Person name		Person name			
Company name		Company name			
Patent No.		Patent No.			
Representative name		Representative name			
Address		Address			
Telephone No.		Telephone No.			
3, Structure designer (Architecture)		4, Other designers			
License name		License name			
Obtained date		Obtained date			
License No.		License No.			
Person name		Person name			
Company name		Company name			
Patent No.		Patent No.			
Representative name		Representative name			
Address		Address			
Telephone No.		Telephone No.			

Outline o	f the	construction	to	apply	v foi
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[1	[1 . Building location, setting location or construction site]					
[2	. Construction type]					
Cor	nstruction type New construction Demonization	n □Renovati	on			
[3.	Construction start date] Year Month	Day				
[4.	Construction completed date] Year Month	Day				
[5.	Intermediate inspection before this application]					
	① Pile work process • In:	spection Day	()		
	Passing certificate No.		()		
	Passing certificate issued date		()		
	② First floor slab rebar arrangement • Ins	pection Day	()		
	Passing certificate No.		()		
	Passing certificate issued date		()		
	③ Facility piping/Interior foundation • Ins	spection Day	()		
	Passing certificate No.		()		
	Passing certificate issued date		()		
		pection Day	()		
	Passing certificate No.		()		
	Passing certificate issued date		()		
	(5) Completion inspection • Ins	pection Day	()		
[6.	Plan change summary] ① Plan change: □Have □Haven't					
	②Number of plan changes:					
	 Construction Site Opening License 	ise No. (e ise No. ()			
	4 Changed of design plan document type					
	⑤Changed summary					