



NBBOA INTERNSHIP PROGRAM

Inspection / Plans Review Log Sheet

Project	Location	Building Permit Number	No. of Part 3 Plan Reviews	No. of Part 3 Inspections	Date of First Review/Inspection	Intern's Initials	Mentor's Initials

As the Intern, I hereby confirm that I have performed the above inspections and/or plan reviews as indicated.

Intern Signature: _____ Date: _____

Name of Intern (printed) _____ Contact Telephone Number: _____

As Mentor, I hereby confirm that the inspections and/or plan reviews were satisfactorily performed under my supervision.

Mentor Signature: _____ Date: _____

Name of Mentor (printed) _____ Contact Telephone Number: _____