



**CITY OF PINOLE  
BUILDING DIVISION  
BALCONY COMPLIANCE AFFIDAVIT**  
CHAPTER 8.36 OF THE PINOLE MUNICIPAL CODE  
BALCONY INSPECTION FOR REAL PROPERTY SALES

**PROPERTY INFORMATION:**

**Building Location:** \_\_\_\_\_ Year Built: \_\_\_\_\_

**Property Owner Information:** (select one & complete)

Name of Property Owner: \_\_\_\_\_

Name of Residential Condominium Association Representative: \_\_\_\_\_

Mailing Address for building contact (owner or condo association): \_\_\_\_\_

Phone # of Contact Person: \_\_\_\_\_

Contact Person's Email: \_\_\_\_\_

**Verification by Licensed Professional Information:** (select type of professional & complete)

Name of Licensed Professional who inspected property: \_\_\_\_\_ Company: \_\_\_\_\_

Mailing Address of Licensed Professional: \_\_\_\_\_

Phone # of Licensed Professional: \_\_\_\_\_ License #: \_\_\_\_\_

Type of professional (check one): \_\_\_\_\_ Professional's Email Address: \_\_\_\_\_

- General Contractor    Architect    Civil Engineer  
Structural Engineer    Structural Pest Control Inspector

**Affidavit Verification:** (Complete verification below)

At the time of my inspection on \_\_\_\_\_,

All balconies (a horizontal platform extending from the exterior wall of a building, accessible from the building's interior, and not directly accessible from the ground) or any parts thereof in weather-exposed areas at the subject building **did not** exhibit signs of deterioration, decay, corrosion, or similar damage that could pose a safety concern and there was no evidence of active water intrusion in concealed spaces of the inspected elements.

Corrective work is required. Briefly describe work and locations:

\_\_\_\_\_

If the box is checked indicating that corrective work is required, apply for a building permit within 60 days of the date on this form, and respond to plan check comments within 10 days of the date of the correction letter, obtain a building permit within 10 days of notification on plan approval and complete all work within 90 days of permit issuance.

I have attached a comprehensive, detailed report of the balcony inspection including photographs.

\_\_\_\_\_  
Signature of Licensed Professional indicated above

\_\_\_\_\_  
Date Signed

**Please submit this completed and signed affidavit and the comprehensive, detailed report and photographs to the Building Division with the fee \$189.00. The documents can be emailed with a completed credit card authorization form to [buildplansubmit@ci.pinole.ca.us](mailto:buildplansubmit@ci.pinole.ca.us) or mailed to:**

**Mail:** Community Development Department  
2131 Pear Street, Pinole, CA 94654  
**Phone:** (510) 724-8912  
**Fax:** (510) 724-4921