

# Catawba County Building Services Division

## Temporary Stage Certification Form

### Instructions:

This form is to be completed and signed by the installer of temporary stages that are erected for less than 180 days for use during special outdoor events. Please certify the stage installation by providing the requested information below, initial the block for the use of a roof/canopy, sign the form as the responsible party for the stage installation, and have this form completed to give to the Building Services Official on the scheduled day of the inspection once the stage is complete. You may refer any questions to the Catawba County Building Services Division at 828-465-8399 extension 0.

I, \_\_\_\_\_ certify that the temporary  
*Name of Stage Provider/Installer*  
stage erected for the time frame of \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ for the special event of \_\_\_\_\_ has been assembled per the manufacturer's instructions or if not pre-manufactured, built to meet safe construction practices for loads and bracing. The temporary stage meets the minimum 125 lb. per sq. ft floor load required by the North Carolina Building Code for safe loading of elevated floors used for performances. The stage  does  does not incorporate a roof/canopy installed onsite which, if present, must be removed at anytime wind speeds at the site exceed \_\_\_\_MPH. Stage personnel will be onsite when stage is in use, if a roof/canopy is part of the stage construction, in order to provide break down due to weather conditions. The stage flooring, if measured over 30 inches above finished grade, have been provided with minimum 42 inch high guardrails/barriers on all non-audience sides which will remain in place during stage use. The stage has been provided with steps that are constructed with a maximum of 7 inch step risers with a minimum of 11 inch tread depth. Handrails have been provided on both sides of the steps.

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Company Name Providing Stage*

\_\_\_\_\_  
*Date*

\_\_\_/\_\_\_/\_\_\_/\_\_\_\_\_: \_\_\_ am/pm  
*Date and Time of Requested Inspection*

\_\_\_\_\_(\_\_\_\_)\_\_\_\_\_  
*Contact Number*