



REQUEST FOR SPECIAL INSPECTION AND/OR PLAN REVIEW

A 72-HOUR NOTICE IS REQUIRED FOR SPECIAL INSPECTIONS

I HEREBY REQUEST SPECIAL SERVICES AS DESCRIBED BELOW. I HAVE READ AND COMPLETED THE FORM AND AUTHORIZE THE PAYMENT OF FEES INCURRED BY THIS AGREEMENT.

 REQUESTOR'S NAME

 REQUESTOR'S SIGNATURE

TODAY'S DATE:

FIELD CONTACT:

COMPANY NAME:

CONTACT CELL NUMBER:

ADDRESS:

PHONE:

E-MAIL:

SPECIAL INSPECTIONS OUTSIDE OF REGULAR WORK HOURS

TOTAL HOURS (4 HOUR MINIMUM) : _____

PROVISIONS FOR FEES ARE ESTABLISHED IN ACCORDANCE WITH SEC. 304, TABLE 3-1 OF THE UNIFORM ADMINISTRATIVE CODE.

PROJECT ADDRESS:

DATE OF SPECIAL INSPECTION REQUEST:

PERMIT NUMBER:

DATE OF INSPECTION REQUIRED:

BUILDING INSPECTOR APPROVAL:

SIGNATURE

DATE

SUPERVISOR APPROVAL:

SIGNATURE

DATE

NOTE: PREPAYMENT IS REQUIRED AT THE TIME OF REQUEST. MAKE CHECKS PAYABLE TO CITY OF BEVERLY HILLS. IN THE SPACE PROVIDED BELOW, WRITE A BRIEF STATEMENT EXPLAINING WHY THE REQUESTED INSPECTION CANNOT BE MADE DURING REGULAR HOURS.
