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City of San Diego Development Services Inspection Office 9601 Ridgehaven Court 220 San Diego, CA 92123 (858)492-5070

Request for Enhanced Inspection Services

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January 2019

The purpose of this form is to request enhanced inspection services. See <u>Information Bulletin 120, Project Inspec-</u> tions for a more detailed description of these services, including the fees. Note that enhanced inspections are subject to inspector availability.

Submit a request for one of the enhanced inspection options listed below. **A separate form must be submitted for each permit.** If an inspector is available to perform the inspection, an invoice will be created to be paid online. All enhanced inspections require the payment of a fee in advance. After the invoice has been paid, the inspection will be scheduled and the applicant will be notified by email.

Any fees paid will not be refunded for enhanced inspections. To cancel a scheduled enhanced inspection, call 858-492-5070.

SECTION I: REQUESTED DAY AND TIMEFRAME

Inspection Request Date: ____/____ (MM/DD/YY)

Time: _____ □ a.m. □ p.m.

Number of Hours Requested: _____

SECTION II: REQUESTED ENHANCED INSPECTION

- □ **Before/After Hours Inspections** Inspections immediately before or after the inspector's regular work day, Monday through Friday between 4 a.m and 6 a.m. or between 3 p.m. and 5 p.m.
- □ **Guaranteed Next Day Inspection** Inspection is guaranteed to be completed during regular business hours on the day selected. Provide at least one business day advance notice. Limit of ½ hour (30 minutes) per inspection.
- Late Nights, Weekends and Scheduled Holidays Inspections performed Monday through Friday, between 5 p.m. and 4 a.m. or Saturdays, Sundays and City holidays, Provide at least two business days advanced notice.

SECTION III: GENERAL INFORMATION

Project Name:

Approval/Permit Number:

Job Address:

Phone Number:

Suite Number:

Requestor Name and Company:

Email Address:

Inspection Contact Name:

Phone Number:

Inspection Contact Company Name:

SECTION IV: INSTRUCTIONS

Identify the requested permit and inspection type from <u>one</u> of the three sections below. Provide all information necessary for the inspector.

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SECTION V: BUILDING, MECHANICAL, ELECTRICAL, OR PLUMBING PERMIT							
Select Permit Type:							
Building Permit □		Combination Permit 🗆					
Electrical Permit 🗆		Mechanical Permit Plumbing Permit					
Select Inspection Type	2:						
Underground □	Rough □	Final 🗆	Other Specify:				
SECTION VI: FIRE SPRII	NKLER/SUPPRES	SION PERMIT					
Select Permit Type:							
Kitchen Hood 🗆		Suppressio	sion (Includes Sprinklers) □ Underground □				
Select Inspection Type and Provide Requested Information:							
Underground:	Visual E]	Hydro 🗆	Flush 🗆			
Backflow Prevent	t ers: Flush 🗆		Total Number of Tampers:				
Fire Sprinklers:	Overhea	ad Hydro 🗆	Sprinkler Final 🛛	Highrise Testing 🛛 🛛 Fi	re Pump Test 🗆		
	Total N	umber of Hea	ads: Total Number of Floors:				
	Affidavi	t <mark>DS-161</mark> Fire S	Sprinkler Alteration	s or Tenant Improvemer	nts (TIs) 🗆		
Suppression Syste	Suppression Systems: Kitchen Hood/Wet Chemical 🗆 Dry Chemical/Spray Booth 🗆						
SECTION VII: FIRE ALA	RM PERMIT						
Select Inspection Type	e:						
Rough Inspection □	n Inspection Final Inspection						
Clean Agent Suppressio	n Agent Suppression Other Special Suppression						
Provide Specific Inform	mation:						
Total Number of Floors: Total Number of Units:							
Total Number of:	Duct Detectors:		Pull Stations:	Strobe Only:			
	Smoke Detecto	rs: ł	Horn Strobes: Other Devices:				
Affidavit <u>DS-163</u> Fire Alarm Alterations or Tenant Improvements (TIs) 🗆							
Comments and/or spec	ial instructions fo	or inspector:		form with button below o ExtendedInspectn@sand			

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