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|  | <p>City of San Diego Development Services Inspection Office 9601 Ridgehaven Court 220 San Diego, CA 92123 (858)492-5070</p> | <h1 style="margin: 0;">Request for Enhanced Inspection Services</h1> | <p>FORM DS-167</p> <p>January 2019</p> |
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The purpose of this form is to request enhanced inspection services. See [Information Bulletin 120, Project Inspections](#) 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

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| Project Name: | Approval/Permit Number: |
| Job Address: | Suite Number: |
| Requestor Name and Company: | Phone Number: |
| Email Address: | |
| Inspection Contact Name: | Phone Number: |
| Inspection Contact Company Name: | |

SECTION IV: INSTRUCTIONS

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

