



## SERVICE REQUEST APPLICATION REQUIRING FIELD INSPECTION

JOB ADDRESS: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

OWNER/CONTRACTOR: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CONTACT PHONE NUMBER \_\_\_\_\_

**PERMIT APPLICATION NUMBERS**

BUILDING APPLICATION: \_\_\_\_\_  
 \_\_\_\_\_

Service is hereby requested for items indicated below from the Building Inspection Division:

	Service Requested	Subject Obj. #	Hrs	Minimum At	Fee	Total Fee
1	New or Alteration Permit for Expired Permit Value of work to be completed \$ _____ by _____	61117	1	\$160.00 plus 10% of the new permit issuance fees		
2	Temporary Certification of Occupancy/ TCO Extension Inspection	61117	2	\$170.00	\$340.00	\$340.00
3	PLACE OF ENTERTAINMENT INSPECTION (Entertainment Commission) AKA: POLICE PERMIT  MASSAGE ESTABLISHMENT INSPECTION (Dept. of Public Health)	61117	1	\$170.00	\$170.00	\$170.00
4	Fire Permit Inspection	61117	1	\$170.00	\$170.00	\$170.00
5	Off-Hour Inspection (2 hours min., \$170.00 each for additional hours)	61119	2	\$170.00	\$340.00	\$340.00
6	Re-Inspection	61117	1	\$170.00	\$170.00	\$170.00
7	Pre-Application Inspection	61117	2	\$170.00	\$340.00	\$340.00
8	RECO Inspection	61118				
9	Subpoena Service	6104	1	\$150.00	\$150.00	\$150.00

General Receipt Number: \_\_\_\_\_

Date of Receipt: \_\_\_\_\_

Received by: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Division: \_\_\_\_\_