

300 Richards Blvd., 3rd Floor Sacramento, CA 95811

Help Line: 916-264-5011 CityofSacramento.org/dsd

After-Hours/Overtime Inspection Request

	Project Name:				
	Permit No.:				
	Job Address/Suite No	:			
	Inspection Contact Na	me:			
	Cell No.:		Email:		
	purpose of this form is e inspections are subje	•		spections services. Note that	
3	separate form must 2. Once complete, plea 3. If an inspector is ava online or at the Perm	t be submitted for each se email the request to ilable to perform the inhit Services counter. Moreon paid, the inspect	expermit@cityofsacr spection, an invoice wil inimum fee is \$492.	amento.org	
	fter-hour inspections re ection. Inspections requ			advance for a two-hour based upon an hourly rate	
Req	uested Day and Time Inspection Request Da		Time:	_	
	Number of Hours Req	uested:			
Req	uested Inspection Before/After-Hours Ins workday, which is Mor	spection – Inspections inday through Friday be	immediately before or a tween 7:30 a.m. and 3:	fter the inspector's regular 00 p.m.	
	Weekends and Scheduled Holidays – Inspections performed Saturdays, Sundays, and City holidays; provide at least two business days advanced notice.				
Dis	cipline/Inspection T	ype □ Plumbing	☐ Mechanical	☐ Electrical	
Per	mit Type	☐ Commercial			

omments and/or special	I instructions for inspector:	
	FOR OFFICE USE ONLY	
Date of Inspection:		
Time of Inspection:		
Inspector's Name:		
Fees Payment Verified:	Yes or No	
*Fee:	_\$	
Supervisor	approval initials	
	time and a half with a minimum of two hours per discipline.	

CDD-0291 Revised 02-10-2023 Page 2 of 2