How to Request for a Plumbing Overtime Inspection

- Complete and email Online Plumbing Overtime Request form to dbi.pidovertime@sfgov.org
- Same day inspection requests must be submitted no later than 2pm for the day of request
- 2 hour minimum for Plumbing Off-Hour inspections and subject to a 4 hour minimum if request is for weekends, holidays or before 6:00AM or after 6:00PM start times.
- All Plumbing overtime requests are subject to approval.
- Once approved, you will be provided an invoice by email with payment instructions.
- Fees must be paid prior to inspection.
ONLINE PLUMBING OVERTIME REQUEST

All fields marked in RED must be filled.
Incomplete applications will not be accepted and inspection request will be denied.

Email completed form to dbi.pidovertime@sfgov.org for approval.

JOB ADDRESS: ________________________________ BLOCK: _______ LOT: ____________

PERMIT NO(S) – PID: ________________________________

OWNER/CONTRACTOR: __________________________ PHONE NO: ________________________________

EMAIL (Write Clearly):

<table>
<thead>
<tr>
<th>Service Requested</th>
<th>Minimum</th>
<th>Total Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Off-Hour Inspections</strong>&lt;br&gt;PID: Each additional hour $158.10</td>
<td>2</td>
<td>$158.10</td>
</tr>
<tr>
<td><strong>NOTE:</strong> Weekends, holidays and requests for before 6AM or after 6PM start time are subject to a 4-hour minimum charge.</td>
<td></td>
<td>$316.20</td>
</tr>
</tbody>
</table>

Date of requested inspection: ____________________________ Time of requested inspection: ____________________________
Contact person: ____________________________ Phone: ____________________________
Reason for request: ____________________________
Floor/area of inspection: ____________________________

Chief/Senior approval:

Off-Hour inspections require Chief Inspector approval with a two-day lead time. Same day inspections may be offered at the sole discretion of the Chief/Senior Inspector(s). **Same day inspection requests must be submitted no later than 2pm for the day of request.** Additional inspection hours, including travel time, will be charged unless other arrangements are made in advance. Fees must be paid in advance.

**SIGNATURE (REQUIRED)**

By signing below, I certify the information provided is accurate.

Applicant Signature: ____________________________ Date: ____________________________

FOR OFFICE USE ONLY

RECEIPT NUMBER: _________ DATE OF RECEIPT: __________ RECEIVED BY: __________

"J:\BID\clericalForms & Org Charts\Forms\PID\PID OT Request Form\2022.01.25 Online PID Overtime Request Application with Instructions.doc"