



**City of Santa Clara**  
The Center of What's Possible

Building Division: 408-615-2440  
 Email: [Building@santaclaraca.gov](mailto:Building@santaclaraca.gov)  
 Permit Center: 408-615-2420  
 Email: [PermitCenter@santaclaraca.gov](mailto:PermitCenter@santaclaraca.gov)  
 Automated Inspection Scheduling System: 408-615-2400

**APPLICATION FOR OVERTIME INSPECTION**

TODAY'S DATE: \_\_\_\_\_ PERMIT NUMBER(S): \_\_\_\_\_  
 ADDRESS OF INSPECTION: \_\_\_\_\_  
 APPLICANT: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
 JOB SITE CONTACT NAME: \_\_\_\_\_ JOB SITE CONTACT PHONE #: \_\_\_\_\_  
 CARD HOLDER NAME: \_\_\_\_\_ CARD HOLDER PHONE #: \_\_\_\_\_  
 CONTACT EMAIL ADDRESS: \_\_\_\_\_

**Description (Please include as much detail as possible):**

**PAID STAMP**

**PREFERRED INSPECTION DATE/TIME**

DATE: \_\_\_\_\_  
 TIME:  6 AM - 8 AM  5 PM - 7 PM  
 OTHER \_\_\_\_\_ (Please specify)

	Building	
	Electrical	
	Mechanical	
	Plumbing	
<b>TOTAL FEES</b>		

**Office Use Only**

Inspector assigned: \_\_\_\_\_ Approved by: \_\_\_\_\_  
 Fees received by: \_\_\_\_\_  
 Data entry/copies done by: \_\_\_\_\_ Copy to inspector \_\_\_\_\_ Spreadsheet \_\_\_\_\_ Tidemark \_\_\_\_\_ Receipt  
 Inspection performed by: \_\_\_\_\_ Start time: \_\_\_\_\_ am / pm Finish time: \_\_\_\_\_ am / pm  
 Payroll code: 150 350 155 355

