



APPLICATION

CHULA VISTA FIRE DEPARTMENT

Fire Safety Engineering - Failed, Special & Re-inspections

Name of Project: _____ **Submittal Date:** _____

Project Address (range): _____

Bldg Permit Number: _____ **Installing Contractor's City of Chula Vista Business License # :** _____

Installing Contractor: _____ **Contractors License # :** _____

Contractor Address: _____ **City:** _____ **State:** _____ **Zip :** _____

Contact Person: _____ **Phone:** _____ **Fax:** _____

Company / Person paying for permit: _____ **Phone:** _____

E-Mail: _____

Fire Permit /Bldg Permit Number of Failed Inspection: _____ **Inspector / Area:** _____

Check / Mark if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.

<input checked="" type="checkbox"/>	#	Fire Safety Engineering [F.S.E.] Inspections	Fee	x Qty	Subtotal \$
<input type="checkbox"/>	18.1	Failed/Re-inspections	\$320		
<input type="checkbox"/>	18.2	Special Insp: not specifically listed herein, 1st hour	\$160		
<input type="checkbox"/>	18.3	Special Insp: not specifically listed herein, per .25 hour after 1st hour	\$40		

1. Inspections within this line item aren't meant to represent the inspections already pre-factored into other activities.
2. Re-inspections as a result of requested inspections not cancelled two hours or more prior to established appointment time or not ready for inspection and/or test upon arrival of the fire department representative [failed per code].

TOTAL:

REMIT TO:

Chula Vista Fire Department • Fire Prevention Division
 276 Fourth Avenue • Building C, Suite B-143 • Chula Vista CA 91910 • (619) 691-5029 • fax (619) 691-5204

OFFICIAL USE:

Deposit Account # 1563000-4782 (156304) Accepted by: _____ Date: _____