



STRUCTURAL OVERTIME INSPECTION FORM

Please complete the entire application and fax it **832-395-9621**. **Note:** Incomplete applications will not be processed.

Date: _____

PROJECT INFORMATION

Job Site
Address: _____

Project No. _____

APPLICANT INFORMATION

Name: _____

Company: _____

Phone Number: _____

Fax Number: _____

Email: _____

PAYMENT INFORMATION

Advanced Pay Account (SR) Number: _____

Signature: _____

CONTACT INFORMATION

Permits Section 832-394-8899

Structural Inspections Section 832-394-8840