



CITY OF RIVERSIDE FIRE DEPARTMENT FIRE PREVENTION DIVISION

REQUEST FOR EXPEDITED PLAN REVIEW SERVICE

General Information

The Fire Marshal reserves the right to approve or deny the request for expedited service based on the availability of staff resources. The request should be submitted as early as possible to allow sufficient time to determine the availability of staff. Requests may be denied due to the lack of available staff at the time or date requested. If the time or date of the request for service is not contiguous to the regular work hours of the staff member, then a 2-hour minimum will be charged. The hourly rate charge for the service is 2.5 times the top step salary of the employee. Travel time will be included in the time charged to the project. Expedited plan review services performed under this program include **only** the fire prevention portion of the plan review and **do not** include expedited plan review by any of the other Departments that may be involved in the overall plan review process.

Today's Date: _____ Project Information Plan Check # _____

Project Name: _____

Contractor Name: _____ Address of Project: _____

Contact Person: _____ Phone Number: _____

Check Type of Service Requested:

First Plan Review _____ Resubmitted Plan Review _____ Field Inspection _____ Other _____

Requested by:

Print Name: _____ Signature: _____

Billing address: _____ Phone: _____ Fax: _____

(For field inspections only) Requested Date and Time of Service: Date: _____ Time: _____

THIS SECTION IS TO BE COMPLETED BY FIRE DEPARTMENT STAFF ONLY

Authorizing Signature: _____ Assigned Staff Member: _____

Anticipated date service to be provided: _____ Permit # _____

SERVICE WORK RECORD (to be completed by the staff member performing the service):

Staff Member Signature: _____ Date(s): _____

Start Time(s): _____ End Time(s): _____

Total Time Worked (Inspector's to include travel time): _____ Hours _____ Minutes _____

Description of work performed: _____

ACCOUNTING (to be input by the staff member performing the service):

_____ Fees and Notices Input into Computronix Database

Date Applicant Contacted: _____

Please return form to the Fire Marshal when completed

2023