

## Special Inspection Request

**PLEASE PRINT CLEARLY AND COMPLETE IN ITS ENTIRETY**

Project Address:		Project No.:		Date:
Owner/Applicant's Name:			Phone:	
Address:		City, State, Zip:		
Proposed Use of Building		Present Use of Building		
Type of Inspection:				
	Building		Combination	
	Electrical		Change of Occupancy	
	Plumbing		Condo Conversion	
	Mechanical		Number of Units _____	
<p>We recommend that you contact your field inspector prior to requesting the inspection. The 24-hour automated inspection request line is (562) 570-6105.</p>				
<p>Information Needed:</p> <p>_____</p> <p>_____</p> <p>_____</p>				
Signature of Owner/Applicant				
Planner:		Zone:		Date Received:
Inspector's Report:				
<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;"><input type="checkbox"/> Additional Pages Attached</p>				
Inspector's Signature			Date:	



City of Long Beach

411 W. Ocean Blvd., 3rd Floor

Long Beach, CA 90802

Visit us at [longbeach.gov/lbds](http://longbeach.gov/lbds)

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To request this information in an alternative format or to request a reasonable accommodation, please contact the Development Services Department at [longbeach.gov/lbds](http://longbeach.gov/lbds) and 562.570.3807. A minimum of three business days is requested to ensure availability; attempts will be made to accommodate requests with shorter notice.