



FIRE DEPARTMENT Fire Prevention Division  
Tel: 305-673-7123

## EXPEDITED INSPECTIONS AND PLAN REVIEW SERVICES REQUEST

### SITE INFORMATION:

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_ Permit #: \_\_\_\_\_

**REQUEST** for (circle one) **Plan Review** or **Inspection** (type of inspection) \_\_\_\_\_

Date: \_\_\_\_\_ Time allotted: \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

Reason for request: \_\_\_\_\_

**EXPEDITED INSPECTIONS/PLAN REVIEWS** are performed Monday – Friday, 5:00 p.m. – 9:00 p.m. and on Saturdays based upon the availability of the inspectors. An invoice with a fee of **\$315.00** will be generated beforehand in order for the above to take place and given to the customer for payment; the paid receipt will then be attached to the request. Be advised that some inspections/plan reviews require two inspectors

**THE CITY'S WEBSITE, [www.miamibeachfl.gov](http://www.miamibeachfl.gov) ; Click on City Hall, Fire, Fire Prevention, New Construction Section, Expedited Fire Inspections and Plan Review Request, fill out information on form and submit.**

### PLEASE EMAIL THIS COMPLETED FORM TO:

**For Plan Review** - Jorge Clavijo, [JorgeClavijo@miamibeachfl.gov](mailto:JorgeClavijo@miamibeachfl.gov)

**For Inspection** – Joseph Bacallao, [JosephBacallao@miamibeachfl.gov](mailto:JosephBacallao@miamibeachfl.gov)

**For additional information, please call 305-673-7123.**

Inspector(s) assigned: \_\_\_\_\_

**Customer present during overtime must complete the section below:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Start time: \_\_\_\_\_ End time: \_\_\_\_\_

**The expedited inspection/plan review fee will be added to the permit/revision number.**

I, \_\_\_\_\_, acknowledge and understand payment process stated above and hereby attest that work was performed within hours stated above.