



Planning & Building Agency
Building Safety Division
20 Civic Center Plaza
P.O. Box 1988 (M-19)
Santa Ana, CA 92702
(714) 647-5800

www.santa-ana.org

ACCELERATED PLAN CHECK REQUEST

Project Address: _____

Misc. Receipt: _____ Processed By: _____ Plan Checked By: _____

Cost: \$181.20 per hour for each discipline. The plan checker will estimate the number of hours for review.

Type of Plan Check: Building _____ Electrical _____

Est. Hrs. _____ Actual _____ Est. Hrs. _____ Actual _____

Plumbing _____ Mechanical _____

Est. Hrs. _____ Actual _____ Est. Hrs. _____ Actual _____

Owner/Representative Signature: _____

Print Name: _____ Date: _____

Telephone Number: () _____ Fax Number () _____

Email Address: _____

_____ **An accelerated plan check review will not include the following:
Fire, Police, Public Works, Planning or Landscaping Plan Check**

Revisions: If requesting an "accelerated revision", the cost will be \$282.75 per hour in addition to the accelerated fee of \$181.20 per hour.

INTERNAL USE ONLY

Name (Last, First, Initial)		Employee #		Division	
From (Date & Time)	To (Date & Time)	Total Hours Worked		_____ Comp Time Requested	
				_____ Overtime Requested	
Employee Signature:			Date:		
AUTHORIZE _____ Comp time			APPROVALS		
_____ Overtime			Division Manager _____ Date _____		
Immediate Supervisor _____ Date _____			Executive Director _____ Date _____		