PRINT

CITY OF CHICO
BUILDING DIVISION

REQUEST FOR OVERTIME PLAN CHECKING		
THIS OVERTIME PLAN CHECK AUTHORIZATION IS FOR THE BUILDING DIVISION ONLY. IT DOES NOT INCLUDE OTHER CITY DEPARTMENTS.		
APPLICANT NAME:_____ PHONE _____ APPLICANT SIGNATURE: _____ ADDRESS: _____PLAN CHK #_____ SUB-DIV.:_____ DATE: _____ Approved by: _____ Assigned to Bldg. Plan Checker(s): #1 _____ #2 _____ ACE: _____		
Estimated hours:	**x $167.00 per hour**	**= $**
Date paid:	**Check # /Cash**	**Receipt #**
ACTUAL TIME/HOURS/DATE	**x $167.00 PER HOUR (2 hour minimum)**	**ACTUAL CHARGES**
P/Cer #1: DATE:		**$**
P/Cer #__: DATE:		**$**
ACE:		**$**
TOTALS: Hours		**$**
LESS ESTIMATES: (HOURS)		**$**
GRAND TOTALS: DUE AND PAYABLE OR AMOUNT TO BE REFUNDED		**$**
NOTES		