

Saint Louis
COUNTY
TRANSPORTATION
PUBLIC WORKS

Date: _____

TO: St. Louis County
Department of Public Works
Plumbing Section
Fax: (314) 615-8268

RE: Overtime charges
Rate: \$65.00 per hour, minimum (3) hours plus mileage.

DATE OF REQUESTED INSPECTION: _____

TIME: _____

PERMIT # _____

ADDRESS: _____

Contractor Name: _____ here by requests an overtime inspection of the permit and information I have provided on this form.

On site point of contact:

Name: _____

Phone Number: _____

Signature _____

Title _____