



Construction Services Department  
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<http://wpb.org>

*"The Capital City of the Palm Beaches"*

**EXPEDITED PLAN REVIEW REQUEST FORM**

Expedited Plan Review Performed Outside Normal Hours: Upon written request, contingent upon availability of plan reviewers, expedited plan review is possible. So that this program does not impact other projects expedited plan review is typically performed outside of normal work hours and is contingent upon the availability of plan review staff to work overtime or extra hours. Pursuant to Resolution 367-09, a minimum fee of 25% of the permit fee or \$100 (whichever is greater) is to be charged for this service. This fee is in addition to any standard plan review and permit fees which are applicable to your project. Typical expedited timeframes are expected to be one-half the standard timeframe for a comparable project not being expedited.

Complete this form in order to submit your request. The appropriate fee will be added to the permit fees in our system once the application has been successfully expedited. If the service is not available due to limitations on staffing availability, no fee will be assessed. All fees are due and payable prior to issuance of the permit. All fees may be paid online or in person.

Date: \_\_\_\_\_ Contractor: \_\_\_\_\_ Application#: \_\_\_\_\_

Address of Job: \_\_\_\_\_ Suite #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Cell #: \_\_\_\_\_ Office #: \_\_\_\_\_

I AM REQUESTING AN EXPEDITED PLAN REVIEW WHICH REQUIRES THE FOLLOWING TRADE(S):

- BUILDING
- ELECTRICAL
- PLUMBING
- MECHANICAL
- FIRE

I UNDERSTAND THAT THIS SERVICE DOES NOT GUARANTEE PLAN APPROVAL AND THAT A COMMESURATE FEE WILL AUTOMATICALLY BE APPLIED TO MY APPLICATION WHICH MUST BE PAID IN FULL PRIOR TO PERMIT ISSUANCE

Contractor or Authorized Agent Signature: \_\_\_\_\_

**FOR OFFICE USE ONLY**

<b><u>BLDG</u></b>	<b><u>ELEC</u></b>	<b><u>PLUMBING</u></b>	<b><u>MECH</u></b>	<b><u>FIRE</u></b>
Reviewer: _____	Reviewer: _____	Reviewer: _____	Reviewer: _____	Reviewer: _____
Pass: <input type="checkbox"/>	Pass: <input type="checkbox"/>	Pass: <input type="checkbox"/>	Pass: <input type="checkbox"/>	Pass: <input type="checkbox"/>
Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>	Fail: <input type="checkbox"/>
Date: _____	Date: _____	Date: _____	Date: _____	Date: _____

*"An Equal Opportunity Employer"*