

**CITY OF NEWARK  
 BUILDING INSPECTION SCHEDULING REQUEST FORM  
 FOR THIS DATE: \_\_\_\_\_**

Permit Number	Building Address	Inspection Type	AM/PM	Notes (unit #, suite#)

Contact Name \_\_\_\_\_

Contact Number \_\_\_\_\_

**THIS FORM IS TO BE FILLED OUT FOR ONE DAY’S INSPECTIONS ONLY  
 AND MUST INCLUDE ALL INSPECTIONS FOR THAT DAY.  
PARTIAL REQUESTS WILL NOT BE ACCEPTED**

REQUESTS SHALL BE SUBMITTED TO [birequests@newark.org](mailto:birequests@newark.org) NO LATER THAN 4:00 P.M. THE PRIOR WORKING DAY.

PLEASE NOTE: The City of Newark offices are closed every other Friday