

Please complete the entire application and submit it via email to the appropriate inspections group.

Note: Incomplete applications will not be processed.

Date: _____

Check the type of reinspection that applies:

☐ PLUMBING

☐ HVAC

☐ ELECTRICAL

PROJECT INFORMATION

Job Site

Address: _____

Project No.: _____

Contractor's License No.: _____
(If applicable)

APPLICANT INFORMATION

Name: _____

Company: _____

Phone Number: _____

Fax Number: _____

Email: _____

PAYMENT INFORMATION

☐ Advanced Pay Account (SR) Number: _____

Signature: _____

CONTACT INFORMATION

Electrical Inspections

hpcelectricalsection@houstontx.gov

832-394-8860

Mechanical Inspections

mechanicalsection@houstontx.gov

832-394-8850

Plumbing Inspections

hpcplumbingsection@houstontx.gov

832-394-8870

