## **Building Permit**

## Stamp Date here



Plan Revision Application Form Complex Buildings

OFFICE USE ONLY:	
Application Processing Fee Receipt #:	Date Approved:
Clerk Initials:	Plan Checker Initials:

## **IMPORTANT: All Plan Revision Applications must include:**

- **2 originals and 1 electronic set** of clearly drawn revised plans. Revisions are to be clouded and identified within the revision block. Paste overs will **NOT** be accepted.
- This application form completed and signed by the owner or agent.
- Plan revision fee is determined based on construction value and payable at application.

Revision applications that are missing **any** of the above requirements will not be accepted. Inspections **will not be**. **performed** unless **approved plans** are on site, including the **approved revision**. Please allow a minimum of **10 working days** for your application to be processed. We will contact you when the revision is ready for pick-up.

Project Address:			
Building Permit No	o.:		
Revision No.:			
)wner/Agent:	Company		<u> </u>
	Name		<u></u>
	Phone:	Email (req'd):	
Description:	Architectural Drawings	Mechanical Drawings	
	Structural Drawings	Landscaping Drawings	
	Civil Drawings	Revised Schedules	
	Electrical Drawings		
	Other		
	Other		
Describe Revisions:			
		(s	ee reverse for additional space)
Authorization:			
I hereby confirm t	that the information		

Description (cont'd)				