



PLAN RE-SUBMITTAL FORM

Revisions **must** be identified on the plan by **clouding** in all sets and must be accompanied by a **narrative** from the Designer of Record. All sets of plans must be sealed by the architect or engineer.

Contact Person: _____ Permit # _____ REV# _____

Contact#: _____ Email: _____
(as provided by the Building Department)

Submittal Type:

- Plan Revisions Corrections to Plan Revision Trusses
- Replacement Plans/Hard Card Shop Drawings Add a permit
- Deferred submittal

Check ALL required disciplines:

Print Contractor	Qualifier Name	License#
<input type="checkbox"/> Structural _____	_____	_____
<input type="checkbox"/> Electrical _____	_____	_____
<input type="checkbox"/> Plumbing _____	_____	_____
<input type="checkbox"/> Mechanical _____	_____	_____
<input type="checkbox"/> Fire _____	_____	_____
<input type="checkbox"/> Zoning	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Engineering

Description of Submittal: _____

Δ Correction #: _____ *Date: _____

APPROVALS

STR	ELE	PLU	MEC
FIRE	ZON	LSP	ENG