REVISION REQUEST

Date: _______________________    Permit #: ______________________

Job Address: _____________________________________________________________________

Contact Name:___________________________________ Phone: __________________________

Disciplines affected by this revision (Please check all that apply):

☐ Building  ☐ Electric  ☐ Plumbing  ☐ Mechanical
☐ Gas  ☐ Site  ☐ Alarm  ☐ Floodplain
☐ Zoning  ☐ Planning  ☐ Fire

☐ Narrative attached
(5 copies of all revisions, including 5 copies of a narrative addressing unmet conditions and any changes to plans are required to be submitted. All 5 copies shall be collated into 5 complete sets).

If you submitted electronically, this form will need to be filled out and uploaded to the document folder in Projectdox at the time you upload your drawings.

Are these plans replacements or additions to previously submitted plans? Replacements ☐ Additions ☐

Scope of proposed change: (attach additional sheets, if necessary).
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Customer Print name:_________________________________________

Signature:___________________________________________________
_____________________________________________________________________________________

FOR OFFICIAL USE:
Permit Tech:___________________________
Comments:___________________________________________________________________________
_____________________________________________________________________________________