



**PLAN/PERMIT REVISION FORM
PLEASE COMPLETE ENTIRE FORM**

REVISION FEE: \$90.00 PER HOUR (MINIMUM = 90.00) _____ =\$

INCREASE CONSTRUCTION VALUE =\$ _____

\$ 90.00 X _____ HOURS BUILDING BALANCE DUE =\$ _____

RECEIPT # _____ ZONING BALANCE DUE =\$ _____

TOTAL BALANCE DUE =\$ _____

Date: _____ Changes are identified by: Triangles Clouds Other _____

Contractor: _____ Phone #: _____

Address of Job: _____ Suite #: _____ Contractor Email: _____

Person to Contact: _____ Cell Phone #: _____ Architect/Eng Email: _____

Increase in Value of Work \$ _____

Permit #	# of Sets	# of revised pages
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- BUILDING**
 ELECTRICAL
 PLUMBING
 MECHANICAL
 ZONING
 FIRE
 ENGINEERING
 LANDSCAPE

Scope of Revision: _____

PRINTED NAME OF APPLICANT
 **Qualifier/Owner Builder

SIGNATURE OF APPLICANT
 **Qualifier/Owner Builder

<u>BUILDING</u> Date _____ Reviewed _____ Denied _____	<u>ELECTRICAL</u> Date _____ Reviewed _____ Denied _____	<u>PLUMBING</u> Date _____ Reviewed _____ Denied _____	Received by _____ Fees _____
<u>MECHANICAL</u> Date _____ Reviewed _____ Denied _____	<u>FIRE</u> Date _____ Reviewed _____ Denied _____	<u>ENGINEERING</u> Date _____ Reviewed _____ Denied _____	
<u>ZONING</u> Date _____ Reviewed _____ Denied _____	<u>LANDSCAPE</u> Date _____ Reviewed _____ Denied _____		