

**REVISION****DEFERRAL****BLDG PERMIT #:** _____ **DATE:** _____**JOB ADDRESS:** _____**TENANT NAME:** _____ **SUITE#:** _____**DESCRIPTION:** _____**APPLICANT NAME:** _____**COMPANY NAME:** _____**ADDRESS:** _____**PHONE #:** _____ **FAX#:** _____

<i>BLDG USE ONLY</i>	<i>PLANS & DOCS RECEIVED</i>	<i>INDICATE QUANTITY BELOW</i>
_____ REVISION LETTER	_____ REVISED PLANS SUBMITTED	_____ REV STRUCT CALCS
_____ REVISED TRUSS CALCS	_____ REVISED T-24 CALCS	_____ ASSESSOR SET
Other info: _____		Submitted to: _____

 BUILDING PLAN REVIEW **DUE DATE:** _____

CHECKED BY PLANCHECKER(s): _____ DATE: _____

 APPROVED NOT APPROVED **PLAN REVIEW HOURS** _____ **PLANNING PLAN REVIEW** **ZONE:** _____ **DUE DATE:** _____

CHECKED BY PLANCHECKER(s): _____ DATE: _____

 APPROVED NOT APPROVED **PUBLIC WORKS PLAN REVIEW** **DUE DATE:** _____

CHECKED BY PLANCHECKER(s): _____ DATE: _____

 APPROVED NOT APPROVED

I understand that I am responsible for all plan check fees that I incur during the course of this additional plan check and that any approval plans not claimed and paid for within 180 days of notification will be disposed of and an invoice procedure for the amount due will be initiated. I further understand that an unclaimed revision may result in delay of final approval for the subject project.

Applicant Signature _____ Date _____