



REVISION INFORMATION FORM
ISSUED PERMITS

RESIDENTIAL - 2 COPIES / COMMERCIAL - 3 COPIES
RESIDENTIAL WITH FIRE ALARM &/OR SPRINKLER SYSTEM - 3 COPIES

\*\*\*NO FAX COPIES\*\*\*

If project was reviewed by a Private Provider, you will need to have the Private Provider approve the change(s) prior to submittal to the Building Dept. Unapproved revisions will only be retained on file for 30 days from date of submittal. Subsequently a complete re-submittal will be required.

Date: Permit # Received by:

Job Site Address

Project Name (Commercial)

Contractor's Name Contact Person

Contact Phone # Fax # E-Mail

(Do not list numbers that have call blocking service)

\*\*\* Incomplete forms will be returned to the applicant \*\*\*

\* INFORMATION SUBMITTED (REQUIRED):

Check all that applies:

- Required Document(s)
Structural Change
Response to a Building Inspection
Change of House Location on Lot
Interior Change Only
Change in Building Footprint/Envelope
Adding a Subcontractor
Other

Information Requested By:

- Zoning
Plans Examiner
Inspector
Land Development
Environmental Mgmt
Other (explain)

DEPARTMENT REVIEW (OFFICE USE ONLY) \*\* PLEASE POST TRACKING COMMENTS & DATE IN COMMENT FIELD\*\*

Table with 6 columns: Department, Initials, Date, Reviewed, Rejected, N/A. Rows include ZONING, PLAN REVIEW, FIRE, ENVMG, OTHER.

ROUTE TO INSPECTION:

Inspector's Name Initials Date

Accepted Field Verify Rejected N/A