



RESUBMITTAL/REVISION/SUPPLEMENTAL INFORMATION FORM

This form must accompany all submittals of revised plans, applications and/or additional information.

REQUIREMENTS

- A completed Resubmittal/Revision/Supplemental Information Form;
- A narrative containing an **itemized summary of your submittal and description of the modifications in detail**;
- All changes **MUST BE CLOUDED** (or otherwise clearly indicated) on revised document(s);
- Modifications to drawings originally signed and sealed by a design professional must be signed and sealed by the original design professional; and
- In lieu of submitting complete sets, only revised sheets need to be submitted. If approved, the contractor will be responsible for collating the revised sheets into the approved job and file stamped drawing sets.

PROJECT INFORMATION

Date of Submittal:		Application or Permit Number:	
Project Address:			
Submission Type:	<input type="checkbox"/> Resubmittal	<input type="checkbox"/> Revision to Issued Permit	<input type="checkbox"/> Supplemental Info
Do these modifications represent a change in the scope of work and increased project valuation? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If yes, provide increase in project valuation:	\$		

CONTACT INFORMATION

Contact Person:			
Phone Number:		E-mail:	

SCOPE OF MODIFICATIONS (CHECK ALL THAT APPLY)

<input type="checkbox"/> ARCHITECTURAL	<input type="checkbox"/> STRUCTURAL	<input type="checkbox"/> FIRE SAFETY	<input type="checkbox"/> LIFE SAFTY	<input type="checkbox"/> EGRESS	<input type="checkbox"/> OCCUPANCY
<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> LOT COVERAGE	<input type="checkbox"/> PARKING	<input type="checkbox"/> DRAINAGE
<input type="checkbox"/> CIVIL ENGINEERING	<input type="checkbox"/> LANDSCAPING	<input type="checkbox"/> OTHER (PLEASE SPECIFY _____)			

DESCRIBE IN DETAIL THE CHANGES FROM ORIGINAL SUBMISSION

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LIST ALL MODIFIED PLAN SHEETS. UNLESS ALL PAGES HAVE BEEN MODIFIED, INCLUDE PAGE/SHEET NUMBERS CONTAINING CHANGES. INCLUDE ADDITIONAL SHEETS IF NECESSARY

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FOR OFFICIAL USE ONLY

ROUTED TO:	<input type="checkbox"/> BLDG	<input type="checkbox"/> PLZN	<input type="checkbox"/> PWD	<input type="checkbox"/> FIRE	<input type="checkbox"/> BES	Date Routed/By:
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