



## **Revision to Approved Plans**

(Changes to Active Permits Only)

Project Address	Permit Number ____ - _____
Contact Person	Phone
Email	Date

**Notes:**

- a) A wet-ink signature by the designer, architect, or engineer is required on the revised set of plans.
- b) Revisions are to be clearly indicated on the revised set of plans using the standard of “Clouding”, circling, or highlighting method.
- c) Revisions not listed on this sheet will not be considered part of this approval.

**Provide an itemized, accurate, and complete description of any and all revisions**

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**For Department Use Only**

Request approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Request approved by: \_\_\_\_\_ Date: \_\_\_\_\_