



REV 3/21/2023

PROJECT ADDRESS:		PERMIT #:		
CONTRACTOR/OWNER:				
PLAN REVISION SCOPE: OVERVIEW ❖	Yes	No	❖ Additional fees and reviews by agency (Fire, Planning, Other) may be required, if the plan change involves an increase or decrease in work scope.	
Does <i>Revision</i> include any exterior work, new or replacement?				
Does <i>Revision</i> include any interior work, new or replacement?				
Does <i>Revision</i> include any mechanical, new or replacement?				
Does <i>Revision</i> include any plumbing, new or replacement?				

- This form may only be used for minor plan revisions, incidental to the main project scope of work. Multiple changes or an expanded scope may require a separate permit. Please call the office to confirm the applicability of this form.
- Submit all revisions in **digital format**. Paper documents are no longer accepted.
- All revisions shall be clearly identified by “clouding”. Briefly identify the changes and scope or work below.
- Please **DO NOT** submit the same sheet size as the originally submitted plans unless the entire sheet has changed.
- Provide revised details and supportive engineering calculations.
- All revisions shall include the Architect/Engineer’s wet stamp signature, registration number and expiration date on **ALL SHEETS, all revised details** and engineering calculations. (CBPC 5536.1, 6733, 6735 and CBC 107.1)
- A minimum fee of \$55 is required at time of revision submittal. Additional charges at \$115/hour may be applied, depending on complexity and review time.

BRIEFLY DESCRIBE THE REVISION:

NAME: _____ PHONE #: _____ DATE: _____

FOR OFFICE USE ONLY

<i>PLANNING REVIEW REQ'D:</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>FIRE REVIEW REQ'D:</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>OTHER RVW. REQ'D:</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<i>SUBMITTAL FEE \$55</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<i>OTHER FEE \$</i>			<i>DATE PAID:</i>		
<i>UPDATE JOB DESCRIPTION:</i>	YES <input type="checkbox"/>	NO <input type="checkbox"/>				<i>BAL. DUE \$</i>		
<i>APPROVED BY:</i>						<i>DATE:</i>		