



REVISION FORM

ATTENTION: _____

PERMIT #: _____

Project Address: _____

Project Name: _____

Contractor: _____

Contact Person: _____

License #: _____ Phone #: _____ Fax #: _____

Email Address: _____

CHECK ALL ITEMS THAT MAY APPLY

- Revision
- Additional Information
- Post Permit

Does this revision change the setbacks? No Yes (*If yes, a new site plan is required showing new setbacks*)

Description of request: _____

Approved

Rejected

Signature

Date:

Printed Name