



A Tradition of Stewardship  
A Commitment to Service

# PERMIT ALTERATION REQUEST

For Changes Within the Scope of the Original Permit

Permit # \_\_\_\_\_

Date \_\_\_\_\_

Revision Number: 1  2  3  4   
(Check one)

Permit Issued  Permit not issued

FOR OFFICE USE ONLY	
<b>ROUTING</b> <input type="checkbox"/> Fire <input type="checkbox"/> Planning <input type="checkbox"/> Public Works <input type="checkbox"/> Engineering <input type="checkbox"/> EM	Bin:
Plan Checker:	

### APPLICANT

The applicant shall submit **three copies** of the plans with changes for review. If the changes are significant or beyond the scope of the original permit, you will be required to apply for a new permit (check with our staff). Please allow 2-3 weeks for approval of changes. Please note that the "JOB" set of plans may be required by the Plan Reviewer prior to issuance or re-issuance of your permit.

### PROPERTY OWNER

Owner Name: _____	Is the Permit Held in This Name? <b>Y</b> <b>N</b>
Address: _____	City: _____ State: _____ Zip: _____
Phone: _____	Fax: _____ Email: _____

### PRIMARY CONTACT

Primary Contact Name: _____	
Firm: _____	
Address: _____	City: _____ State: _____ Zip: _____
Phone: _____	Fax: _____ Email: _____

### PROPERTY DESCRIPTION

Street Address: _____ Suite/Unit #: _____ City: _____ Zip: _____ Cross Street: _____ APN#: _____ <b>Description of Change:</b> For numerous revisions, please cloud & delta revisions, revise Title Page and provide a Revision Narrative identifying the revisions on each page. _____ _____ _____	<b>Valuation for Changes*:</b> *If the valuation is deemed to be less than industry standards and/or the valuation calculator, staff will make the necessary adjustments. I am including: (3) Complete revised plan sets <b>or</b> (3) Copies of revised sheets only that include revised Title Page (revisions identified with Cloud & Delta). (2) sets of revised reports or calcs. Revisions Narrative (if necessary or requested).
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