

DEVELOPMENT SERVICES DEPARTMENT

Transmittal Form

All information on this form must be **complete and approved** by a Development Services staff member prior to dropping off your plans and documents.

DATE:					
RECORD/PERMIT NU	JMBER:				
TYPE OF SUBMITTA	L: O Submittal	Resubmitta	al Plan Change	O Deferred Submittal	Other
MAIN CONTACT FOI	R PLANS:				
Name					
Phone #					
E-mail Address					
WHAT WILL BE SUB Be as detailed as possible **For resubmittals, your department provided corr	MITTED: Inclu e. must have a set of	de the type of do	ocument, number of department that prov	copies, and correction re	esponses.
CITY STAFF APPROV	VAL:			(REQUIRED)	

The City is not responsible for lost or stolen plans