



Submittal Form

Date _____

Permit Number _____

Job Address _____

Contractor _____

Contact Name _____

Applicant E-Mail _____

Contact Phone _____

Inspection Notice E-Mail _____

Property Owner Name _____

Property Owner E-Mail _____

Property Owner Phone _____

Date _____		Department Use Only			
Permit Technician Initials _____					
Initial Submittal	Work Description _____				
RFI Request for Information (Address Tabled Comment)					
Structural	Electric	Mechanical	Plumbing	Zoning	
Environmental	Engineering	Historical	CAB	Fire	
Name of plan reviewer who requested RFI _____					
Correction (Address a Pending Comment) Corrections shall be accompanied by a narrative as per B.R.B.R. Sec. 19-117					
Structural	Electric	Mechanical	Plumbing	Zoning	Water
Environmental	Engineering	Historical	CAB	Fire	Regulatory
Revision: Revisions shall be accompanied by a narrative as per B.R.B.R. Sec. 19-117					
Revision number _____		Work Description _____			
Misc.	Contract	Re-apply	Renewal	TCO	Pre-Permit Construction Agreement
Change of Contractor	Sub-Trade OTC	Temp for Test	Other	_____	