

Residential Building Permit Revision Application

All Revision Applications MUST include:

1. Your **original approved plans**;
2. **1 set** of clearly drawn revised plans. Revisions are to be clouded and identified within the revision block. Paste overs will **NOT** be accepted;
3. **This application form** completed and **signed** by the owner or agent.

Permit#: ____ - _____

Rev.#: ____ - _____ - ____

Revision applications that are missing **any portion** of the above requirements will not be accepted. A revision permit fee will be collected at time of application. Additional fees will be collected at the time of issuance. Inspections **will not be performed** unless **approved plans** are on site, including the **approved revision**. Please allow **5 working days (estimated)** for your revision application to be processed. Please **do not call**; you will be contacted when the revision is ready for pick-up.

Please complete the following:

Site Address: _____

Owner / Agent: Company: _____

Name: _____

Email: _____

Phone: _____ Cell: _____

- Description:**
- | | |
|---|---|
| <input type="checkbox"/> Increase Building Size | <input type="checkbox"/> Structural Changes |
| <input type="checkbox"/> Increase Building Height | <input type="checkbox"/> Retaining Walls (Under 1.2m) |
| <input type="checkbox"/> Add Exterior Doors and Windows | <input type="checkbox"/> Removal of Secondary Suite |
| <input type="checkbox"/> Add or Extend Deck | <input type="checkbox"/> Exterior Architectural Changes |
| <input type="checkbox"/> Floor plan layout changes | <input type="checkbox"/> MBE/Floor Elevation Changes |
| <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Other _____ | |

Specify Revisions: _____

(see reverse for additional space)

Authorization

I hereby confirm that the information I have supplied is true and correct: _____
(Owner or Agent's Signature)

OFFICE USE ONLY

Date of Application: _____ Date of Review: _____

Received By: _____ Approved: _____

Counter Clerk (initial)

Plan Checker (initial)

Given To: _____ Scan Page: 1 ____ 2 ____ 3 ____ 4 ____ 5 ____ 6 ____ Other ____

Comments: