



REVISION REQUEST

ALL REVISIONS REQUIRE A SIGNED CHANGE ORDER WITH COST EVALUATION.

Date: _____

Permit Number: _____

Address Where Work is Being Done (to include unit or bay number):

CONTRACTOR NAME: _____

Phone: () _____

Contact Person: _____

Fax: () _____

Cell Phone #: () _____

TYPE OF REVISION (Circle All That Apply): Structural Elec Mech Plbg Eng Other _____

ADDED CONSTRUCTION COST FOR THIS CHANGE: \$ _____

EXPLAIN REVISION: _____

NOTE: To avoid delay, **the revision needs to be clear** on the (2) drawings submitted. The Plan Reviewers may need the job site plans.

I understand a fee may be charged in accordance with the City of Delray Beach LDR 2.4-21. The fee for a revision is \$75.00 per discipline for the first sheet, and \$1.00 for each additional revised sheet. For **ADDED CONSTRUCTION COST**, the fee will be based on the Building Permit Fees.

SIGNED: _____

OFFICE USE ONLY

ROUTING:

PATH DEPT. APPROVED BY/DATE:

FEES:

REVISION FEE:

\$ _____

ADDED VALUE PERMIT FEE:

\$ _____

OTHER FEES AS APPLICABLE:

Parks: \$ _____

Public Bldgs. \$ _____

Schools \$ _____

Road \$ _____

Radon \$ _____

DPR \$ _____

Other \$ _____

CHANGE ORDER DOCUMENTATION ACCEPTED: _____

PLAN REVIEWER: _____

DATE: _____

TOTAL FEES DUE: \$ _____