Drop off Corrections SheetPlease complete this form and bring them to the Building Dept.

| Date | | Permit No. | | APN | | | |
|--------------|--|---------------|--|-----|--|--|--|
| Contact Name | | | | | | | |
| Phone | | Email | | | | | |

| Select | Yes | No |
|------------------------------------|-----|----|
| Response to Plan Check Corrections | | |
| Response to Planning Corrections | | |
| Revision to Permit Scope of Work | | |

| | Yes | No |
|---------------------------|-----|----|
| Response Letter | | |
| All Comments Responded to | | |
| Slip Sheet Plans Needed? | | |
| 2 Full Set of Plans | | |
| Engineering Calcs | | |
| Geotech Report | | |
| Energy Calcs | | |
| Truss Calcs | | |
| Fire Sprinkler | | |
| Assessor Floor Plan | | |
| Planning Docs | | |