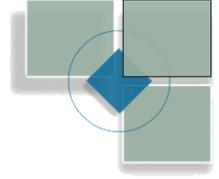




DeKalb County Department of Planning & Sustainability

Lee May
Interim Chief Executive Officer

Andrew Baker
Director



REVISION SUBMITTAL APPLICATION

DATE: _____

HAS PERMIT BEEN ISSUED? YES NO

REVISION # _____ AFTER PERMIT IS ISSUED

All revisions must be accompanied by a minimum of 6 (six) copies of the REVISED SHEETS ONLY and attach to the plan set a written letter certified by the engineer (stamped and sealed) of all revisions.

Please indicate on plans: (1) "Cloud" all areas of revisions (2) Make clear/concise reference to modified document, i.e.,  labeled. (3) List all revisions with date and labels in the revision block

Revision Fee: \$300.00 Permit Extension Fee: \$300.0
Shaded Area for Office Use Only

Development AP #	Land Development Permit #
Date Development Permit Issued	Project Use
Project Name	Phase/Unit

Site/Property

Address/Parcel ID		City	State	ZIP
Building No.	Floor No.	Apartment/Suite No.		

Contact Person

Property Owner				
Address				
City		State		ZIP
Tel #		Mobile #	Fax#	
E- Mail				

Revision Summary

In the space provided below, describe in detail the proposed changes to the plan.

****Attach certified letter to plan sets**** succinctly explaining the **Reasons for the Revision**. They may include statements relating to any or all of the following: (a) The need to correct an error; (b) The need to reflect changing circumstances in field conditions; (c) The need to improve the ability of the plan to fulfill the objectives in the plan. The summary must include the chronology of all revisions and a purpose statement.

ACKNOWLEDGEMENT CERTIFICATION - I do hereby certify that, to the best of my knowledge and belief, all information supplied with this submittal is true and accurate.

Signature: _____ Date: _____