MASON COUNTY
COMMUNITY SERVICES

Request for Revision of Approved Plans

Permit Number BLD/COM: _____ - _____ Applicant Name:_____
Email: _____ Phone #: _____ Project Title: _____
Parcel Number: _____

Please provide a complete, detailed description of the proposed revisions to the approved plans. Please return this form to the Mason County Permit Center.

_____
_____

The following documents <u>are required</u> to be submitted with this form.

- **One set of revised plans or addendum indicating the changes.** Yes__ No__
- **One set of the <u>approved</u> construction plans.** Yes__ No__
  <u>(The "Red Stamped" approved site plan must be included)</u>
- **Revisions are to be clouded with delta's clearly and accurately identified on the revised plan/s or addendum.** Yes__ No__
- **Does the plan contain a structural, architectural or soils engineer analysis?** Yes__ No__
  (If yes, has the Registered Professional/s approved this revision) Yes__ No__
  (Is a stamped and signed approval included with this request) Yes__ No__

(If no engineering or other changes requiring a registered professional have been made, the plan may be approved without written consent of the engineer or architect of record)

- **Does the proposed revision modify the footprint or location of the structure/s?** Yes__ No__

(If YES, is a revised site plan, with all new setback dimensions included with this request?) Yes__ No__

Additional Information:

_____

Applicants Signature: _____ Date: _____

STAFF REVIEW SECTION

Reviewed by: _____

Department for Review	Date Received	Assigned Reviewer	Date Approved	Reviewers Approval
Building				
Planning				
Public Health				
Fire Marshal				
Public Works				

Original Valuation: $_____

Additional Valuation: $_____

Sq. Ft. _____ X _____ $_____
Sq. Ft. _____ X _____ $_____

Additional Fees: $ _____
Additional Plan Review: $ _____
Additional Building Permit: $ _____
Additional Plumbing: $ _____
Additional Mechanical: $ _____
Other: $ _____

Total Due: $_____