



Plan Check Request

Date Submitted _____

Job Information

Job Name _____
Street Address _____
City, Zip _____
Assessor Parcel # _____

Bill To

Business Name _____
Contact _____
Email Address _____
Street Address _____
City, Zip _____
Phone No. _____
Fax No. _____

Submitted By

Business Name _____
Contact _____
Email Address _____
Street Address _____
City, Zip _____
Phone No. _____
Fax No. _____

Project Type:

✓Check One:

- New Building Construction
- Building Addition
- Tenant Improvement to Existing Building or Space
- Other (please specify): _____

Property Use:

✓Check One:

- Residential
- #Single Lots _____ ☑#Multi Units _____
- Commercial
- Restaurant
- Industrial
- Other (please specify): _____