



Incomplete Submittal Form

Planning, Building and Code Enforcement

PLAN CHECK #:

This form is required when the project applicant is submitting either incomplete plans or an inadequate number of plan sets for the plan review process.

CITY STAFF to complete this section:

PROJECT ADDRESS:																																						
STAFF NAME:	DATE:																																					
<input type="checkbox"/> Inadequate number of plan sets; the number of sets remaining to be submitted before starting plan review is: _____ <input type="checkbox"/> The plan sets are incomplete; the following information is needed before starting plan review: _____ _____ _____ _____ _____	<input type="checkbox"/> The applicant has decided not to make concurrent submittal for the following items: <table border="1"> <thead> <tr> <th><i>Enter Y/N</i></th> <th><i>Required</i></th> <th><i>Submitted</i></th> </tr> </thead> <tbody> <tr><td>Architectural Plan</td><td></td><td></td></tr> <tr><td>Structural Plan</td><td></td><td></td></tr> <tr><td>Electrical Plan</td><td></td><td></td></tr> <tr><td>Mechanical Plan</td><td></td><td></td></tr> <tr><td>Plumbing Plan</td><td></td><td></td></tr> <tr><td>Fire/HazMat</td><td></td><td></td></tr> <tr><td>Planning Division Clearance</td><td></td><td></td></tr> <tr><td>Public Works Clearance</td><td></td><td></td></tr> <tr><td>County Health Approval</td><td></td><td></td></tr> <tr><td>Wastewater Facility Approval</td><td></td><td></td></tr> <tr><td>Other:</td><td></td><td></td></tr> </tbody> </table>		<i>Enter Y/N</i>	<i>Required</i>	<i>Submitted</i>	Architectural Plan			Structural Plan			Electrical Plan			Mechanical Plan			Plumbing Plan			Fire/HazMat			Planning Division Clearance			Public Works Clearance			County Health Approval			Wastewater Facility Approval			Other:		
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APPLICANT to complete and sign this section:

STATEMENT OF INCOMPLETE SUBMITTAL

I understand that an incomplete submittal may result in delays in plan review, permit issuance, inspections, and construction, and may lead to additional costs. However, I am making an incomplete submittal for the following reason (please briefly explain):

The anticipated date to submit remaining plans is: _____

I am the:

- Mark one:
 Developer
 Owner
 Tenant
 Architect
 Engineer
 Contractor
 Authorized Agent

SIGNATURE PRINT NAME DATE

EMAIL ADDRESS PHONE #