



PLAN REVISION / NEW SCOPE OF WORK FORM

CITY OF DEL MAR
1050 CAMINO DEL MAR
(858) 375-9514

PLAN CHECK NUMBER: _____ DATE FILED: _____

Original Permit Number:

Site Address:

Revisions must be submitted by owner or approved signed agent. If original plans were prepared by an architect or engineer, revisions must be signed by that person.

Elements Revised: Plans Calculations Soils Energy Other

SUBMIT ONLY THE REVISED PAGES/SHEETS

Describe revisions *in detail*, including pages, where each revision is shown:

If revised sheets are to replace existing sheets, list here:

Does this revision, in any way, alter the exterior of this project? Yes No

Does the revision, in any way, alter the plot plans? Yes No

Does the revision, in any way, alter the floor plans? Yes No

Does this revision add or remove ANY floor area? Yes No

Contact: _____ Owner Agent

Phone:

Email:

Staff Use Only

Planning:	Fire:
Engineering:	Env:

