



# Plan Revision Application

(Please submit completed application and 3 sets of revised plans/sheets to the Permit Center)

Revision Submission Date \_\_\_\_\_

Project Status:  Under Review  Permitted

### GENERAL INFORMATION

City Permit/Project Number \_\_\_\_\_

Project Name \_\_\_\_\_

Project Description \_\_\_\_\_

Project Address \_\_\_\_\_

Floor/Suite \_\_\_\_\_

### APPLICANT (Primary Project Contact)

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

### OWNER/CONTRACTOR (Secondary Project Contact)

Work will be done by:  Owner  Contractor

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

### CONTRACTOR LICENSES

SC Contractor License No. \_\_\_\_\_

City of Charleston Business License No. \_\_\_\_\_

### PROJECT INFORMATION – Type of Work

<input type="checkbox"/> Commercial (IBC)	<input type="checkbox"/> Residential (IRC)				
<input type="checkbox"/> Interior	<input type="checkbox"/> Exterior				
<input type="checkbox"/> New	<input type="checkbox"/> Alteration				
<input type="checkbox"/> Building	<input type="checkbox"/> Fire	<input type="checkbox"/> Electrical	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Gas	<input type="checkbox"/> Mechanical

**COST - Estimated Revision Costs** (including overhead & profit for mechanical, plumbing, gas, electrical & fire protection systems)

\$ \_\_\_\_\_

**REVISION DESCRIPTION** (describe proposed changes to project and reference revised sheet numbers – if necessary, attach comment sheet)

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