

CMI # \_\_\_\_\_ (to be filled in by CodeMaster)

# PLAN REVIEW APPLICATION

- CHECK ALL THAT APPLY:
- NEW CONSTRUCTION
  - RENOVIATION
  - ALTERATION
  - COMMERCIAL
  - RESIDENTIAL

## GENERAL INFORMATION

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

MUNICIPALITY: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

OWNER'S ADDRESS: \_\_\_\_\_

OWNER'S PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

APPLICANT'S PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## PROJECT INFORMATION

USE GROUP: \_\_\_\_\_ PROPOSED WORK: \_\_\_\_\_

CONSTRUCTION TYPE: \_\_\_\_\_

NUMBER OF STORIES: \_\_\_\_\_ ESTIMATED PROJECT COST: \$ \_\_\_\_\_

PROJECT SQ.FT.: \_\_\_\_\_ ACCESSIBILITY COST: \$ \_\_\_\_\_

## SERVICE REQUESTED

- PRELIMINARY PLAN REVIEW
- COMPLETE REVIEW (includes Building, Mechanical, Plumbing, and Electrical)
- BUILDING REVIEW
- MECHANICAL REVIEW
- PLUMBING REVIEW
- ELECTRICAL REVIEW
- SPRINKLER REVIEW
- ENERGY REVIEW
- ACCESSIBILITY REVIEW
- HAZARDOUS MATERIALS REVIEW

(A DEPOSIT IS REQUIRED FOR ALL PLAN REVIEW SERVICES)

**Deposit: \$** \_\_\_\_\_ **Check #:** \_\_\_\_\_ **Received By:** \_\_\_\_\_

The information contained in this application is true and accurate to the extent of my knowledge. The attached review instructions have been read and are understood.

SIGNATURE: x \_\_\_\_\_ PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

| — INSPECTOR USE ONLY — |             |                          |
|------------------------|-------------|--------------------------|
| INSPECTOR: _____       | DATE: _____ | APPROVED / DENIED: _____ |
| INSPECTOR: _____       | DATE: _____ | APPROVED / DENIED: _____ |