



PLANNING, COMMUNITY, & ECONOMIC DEVELOPMENT DEPARTMENT  
**RESUBMITTAL/ PLAN REVISION /ADDITIONAL INFO COVER SHEET**

Mailing Address: P.O. Box 547, Anacortes, WA 98221

Office Location: 904 6<sup>th</sup> Street, Anacortes WA 98821

Phone: (360) 299-1984

**Please use this form to submit revisions or additional information to your permit application.**

Permit /Project #: \_\_\_\_\_ Date: \_\_\_\_\_

Project Name: \_\_\_\_\_ Project Address: \_\_\_\_\_

Project Contact: \_\_\_\_\_ Company Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Has the permit been issued yet?  Yes  No

All revisions must be either **clouded or highlighted** & wet stamped by an architect/ engineer (if applicable).

Has this been done?  Yes  No

**What department(s) is this resubmittal/ revision /additional information to go to?**

Planning Dept.  Building Dept.  Fire Dept.  Stormwater  Public Works Dept.

**Is the plan revision or additional information, in response to a plan review letter?**

Yes. A copy of the plan review letter with itemized responses to each item is required.

No, the revision or additional information is initiated by the applicant, landowner, designer, or builder.

**If not in response to a Plan Review Letter**, please explain the nature of the revisions and/or additional info:

**Are you submitting a full replacement?**  Yes  No **If not what page # is being replaced?** \_\_\_\_\_

**Two full sized copies of all revised /additional information is required.** Has this been done?  Yes  No

**Two 11" X 17" reduced copies of revised site or floor plan is required.** Has this been done?  Yes  No

**Check the box next to the type of plan, report, or calculation where revisions or additional information can be found.**

<input type="checkbox"/>	Site Plan	<input type="checkbox"/>	Building Plans	<input type="checkbox"/>	Structural Plan
<input type="checkbox"/>	Landscape Plan	<input type="checkbox"/>	Parking Plan	<input type="checkbox"/>	Tree Preservation Plan
<input type="checkbox"/>	Arborist Report	<input type="checkbox"/>	SEPA checklist	<input type="checkbox"/>	Wetland Report
<input type="checkbox"/>	Geotechnical Report	<input type="checkbox"/>	Storm Drainage Analysis	<input type="checkbox"/>	TESC Plan
<input type="checkbox"/>	Civil Plan	<input type="checkbox"/>	Lot Coverage Calculations	<input type="checkbox"/>	Impervious Surface Calculations
<input type="checkbox"/>	FAR Calculations	<input type="checkbox"/>	Grading Plan	<input type="checkbox"/>	Survey (Boundary /Topo)
<input type="checkbox"/>	Mechanical Plan	<input type="checkbox"/>	Plumbing Plan	<input type="checkbox"/>	Other: _____

**FOR OFFICE USE ONLY:**

<b>ROUTED:</b>		<b>ROUTED TO:</b>	<b>DATE ROUTED:</b>	<b>APPROVED BY:</b>	<b>DATE APPROVED:</b>
<input type="checkbox"/>	Building Dept.				
<input type="checkbox"/>	Planning Dept.				
<input type="checkbox"/>	Stormwater				
<input type="checkbox"/>	Public Works Dept.				
<input type="checkbox"/>	Fire Dept.				
<input type="checkbox"/>	Third Party Review				