



**BUILDING DIVISION**  
**Transmittal Letter**

This form is recognized by most Building Departments in the Tri-County area for transmitting information. Please complete this form when submitting information for plan review responses and revisions. This form and the information it provides helps the review process and response to your project.

**TO:** \_\_\_\_\_

**DEPT:** BUILDING DIVISION \_\_\_\_\_

**FROM:** \_\_\_\_\_

**COMPANY:** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**RE:** \_\_\_\_\_  
(Site Address)

\_\_\_\_\_ (Project name or subdivision name and lot number)

**DATE RECEIVED:**

By: \_\_\_\_\_

\_\_\_\_\_ (Permit/Case Number)

**ATTACHED ARE THE FOLLOWING ITEMS:**

Copies:	Description:	Copies:	Description:
_____	Additional set(s) of plans.	_____	Revisions: _____
_____	Cross section(s) and details.	_____	Wall bracing and/or lateral analysis
_____	Floor/roof framing.	_____	Basement and retaining walls.
_____	Beam calculations.	_____	Engineer's calculations.
_____	Other (explain): _____		

REMARKS: \_\_\_\_\_

FOR OFFICE USE ONLY			
Routed to Permit Technician:	Date:	Initials:	
Fees Due: Yes No	Fee Description:	Amount Due:	
		\$	
		\$	
		\$	
		\$	
		\$	
Special Instructions:			
Reprint Permit (per PE):	Yes	No	Done
Applicant Notified:	Date:	Initials:	