



Revision Cover Sheet

This sheet shall be completed and submitted in conjunction with any of the following: Shop drawings, trusses, letters, plans (either duplicate or revised), alterations, *or anything that does not contain an application.*

Date of Submittal: _____ Permit #: _____

Owner Name: _____ Owner Phone #: _____

Contractor Name: _____ Contractor Phone #: _____

Project Name and Address: _____

Contact Email: _____

Description of Revisions: _____

Note:

- Plans will only be accepted with revisions clouded and in black ink **only** and with **no** highlights.
- There is a revision fee of **\$76** per hour of plan review for each discipline. The minimum fee of \$76 for the first hour of each discipline is **due at submittal**.
- **Revisions will result in an additional Hillsboro Beach Surcharge.** Please refer to the Town of Hillsboro Beach Fee schedule for more details.

Please check the appropriate disciplines to review your submittal:

- | | | |
|-------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> Structural | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Fire | <input type="checkbox"/> Zoning |

For Office Use Only:

Department	Approved By	Date	Remarks	Hourly Count
Structural				
Mechanical				
Plumbing				
Electrical				
Fire				
Zoning				

Revision Number: _____ Total Time: _____ Total Revision Fee: _____