



APPLICATION / CHECKLIST
CONSTRUCTION

POST PERMIT
SUBMITTAL

Type of submittal (Check one): Blanket Permit Revision Sprinkler Shop Drawing

For Shop Drawing, please specify type: _____

For Revisions, please describe briefly: _____

Parent Permit #: _____ Child Permit #: _____

Project Address: _____

Tenant Name: _____ Floor #: _____

Contact Name: _____ Contact Phone: _____

Contact Company Name: _____

Mailing Address: _____

City: _____ Zip Code: _____

Email: _____

PLEASE COMPLETE THE SECTIONS BELOW IF APPLYING FOR A REVISION

Note: Changes of Use may not be included as a revision

Did the project have an associated Master Use Permit? Yes No

If yes, the Project #: _____

Did the project go through Design Review (DR), Administrative DR or Streamlined DR? Yes No

Did the project need to obtain a Landmark or Historic Board Certificate of approval? Yes No

Has the primary applicant or financially responsible party changed since the original permit was issued? Yes No

If yes, please attach an updated Statement of Financial Responsibility form.

This permit revision includes the following changes:

LAND USE/ZONING

- A Change in the building footprint? Yes No
- An increase in the building height? Yes No
- A decrease in floor to ceiling height at the street level floors? Yes No
- A decrease in the depth of any street level commercial space? Yes No
- Changes to projections such as bays, decks, etc? Yes No
- Changes to approved façade materials? Yes No
- Changes to landscaping? Yes No
- Changes to any feature counted in Green Factor compliance? Yes No
- Changes to the number, size, or configuration of parking spaces? Yes No
- Changes to the location or width of vehicular access? Yes No
- Changes to street level façade transparency? Yes No

DRAINAGE

- Changes the drainage plan? Yes No
- Change in how storm water is managed on site? Yes No
- Change so that an existing building will be demolished to the foundations? Yes No
- Increase in the amount of impervious surface? Yes No

ENERGY/MECHANICAL

- Change in the building envelope? Yes No
- Change in the mechanical equipment? Yes No

ENVIRONMENTALLY CRITICAL AREA (ECA)

- Do the revisions occur in an ECA or its buffer? Yes No

GEO SOILS

- Change to retaining wall locations, height, or type? Yes No
- Change to the foundation location, type, or depth? Yes No
- Change to the temporary excavation/shoring plan? Yes No

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I, \_\_\_\_\_, am the primary applicant or financially responsible party for this development permit. I declare that the scope of design changes indicated above are accurate and represent the full scope of proposed changes related to **all applicable Land Use and Construction regulations**. I understand that misrepresentation of the scope of design changes that results in non-compliance with **any Land Use or Construction Regulation**, Design Review approved features/materials or elements, or conditions of a Land Use decision, may result in SDCI requiring removal and replacement of such elements or features in order to bring the development back into compliance with the original permit approvals, conditions or requirements.

\_\_\_\_\_  
Printed Name of Applicant/Financial Responsible Party

\_\_\_\_\_  
Signature of Applicant/Financial Responsible Party

\_\_\_\_\_  
Date