

STREET IMPROVEMENT PLAN (SIP) MATERIAL TRANSMITTAL FOR DESIGN GUIDANCE SUBMITTALS

This form must accompany **all** SIP Design Guidance materials submitted to the SDOT Street Use Counter.

SIP Project # _____ Project Address _____

Materials Submitted by _____
(Print Name)

Check the % Complete that applies to your submittal

SIP Design Guidance Submittal	
<input type="checkbox"/> 0 – 30% Plans	<p>Required Material Submittals:</p> <input type="checkbox"/> 2 Paper Copies of Plans <input type="checkbox"/> 1 Electronic file of plans in PDF format <input type="checkbox"/> List of Questions or Proposed Agenda for Design Guidance <input type="checkbox"/> Project Scope and Details Form (if not previously submitted) <input type="checkbox"/> Site Photos (if not previously submitted)
	<p>Other Materials Submitted</p> <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/> 30% +Plans	<p>Required Material Submittals:</p> <input type="checkbox"/> 2 Paper Copies of 30%+ Plans <input type="checkbox"/> 1 Electronic file of 30%+ Plans in PDF format <input type="checkbox"/> List of Questions or Proposed Agenda for Design Guidance <input type="checkbox"/> Project Scope and Details Form (if not previously submitted) <input type="checkbox"/> Base Map Checklist (if not previously submitted) <input type="checkbox"/> Survey Checklist (if not previously submitted) <input type="checkbox"/> Site Photos (if not previously submitted)
	<p>Other Materials Submitted</p> <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/> 60% Plans	<p>Required Material Submittals:</p> <input type="checkbox"/> 2 Paper Copies of 60% Plans on 60% Complete SIP title block <input type="checkbox"/> 1 Electronic file of 60% Plans in PDF format <input type="checkbox"/> List of Questions or Proposed Agenda for Design Guidance <input type="checkbox"/> Project Scope and Details Form (if not previously submitted) <input type="checkbox"/> 60% Complete Street Improvement Checklist <input type="checkbox"/> Base Map Checklist (if not previously submitted) <input type="checkbox"/> Survey Checklist (if not previously submitted) <input type="checkbox"/> Site Photos (if not previously submitted)
	<p>Other Materials Submitted</p> <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/> Design Guidance Plan Revision <i>(Must be submitted a minimum of 2 weeks prior to the Design Guidance Meeting Date)</i>	<p>Required Material Submittals:</p> <input type="checkbox"/> 2 Paper Copies of Plans <input type="checkbox"/> 1 Electronic file of Plans in PDF Format Meeting Date: _____

For Official Use Only

DATE STAMP HERE

SDOT STREET USE STAFF TO FILL OUT BOTTOM PORTION OF FORM

Seattle Department of Transportation | Street Use Division
 700 Fifth Avenue, Suite 2300 | PO Box 34996
 Seattle, Washington 98124-4996
 (206) 684-5253 | SDOTPermits@Seattle.gov

STREET USE—RECEIPT OF DOCUMENTS

STREET USE RECEIVED THE FOLLOWING ITEMS FOR

SIP PROJECT # _____



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<input type="checkbox"/> Street Improvement Permit Application <input type="checkbox"/> Project Scope and Details Form <input type="checkbox"/> List of Questions or Proposed Agenda for Design Guidance <input type="checkbox"/> Base Map Checklist <input type="checkbox"/> Survey Checklist <input type="checkbox"/> 60% Complete SIP Checklist <input type="checkbox"/> 2 Paper Copies Plans	<input type="checkbox"/> 1 Electronic PDF file of plans <input type="checkbox"/> Site Photos <input type="checkbox"/> Deposit \$ _____ Amount <input type="checkbox"/> Other materials submitted _____ _____
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