

## CITY OF MERCED

## **DEFERRED SUBMITTALS OR PLAN REVISIONS NARRATIVE**

In order to appropriately process deferred submittal items or plan revision request, this form shall be completed in its entirety by either the design professional of record or the permit applicant. Providing the following information will ensure an accurate and effective plan review.

Note: A complete set of revised plans shall be submitted. Missing or inaccurate information within this document or the proposed construction drawings and any supporting documents may delay the review and approval process.

Permit Number: \_\_\_\_\_ Job Address:\_\_\_\_\_

		Deferred Submittal/RevisionEmail		
		e Below Options:		
□ De	eferred Submi an Revision: _	ittal item:		
Designer I	Name		Contractor Name	
Designer Ph. Number			Contractor Ph. Number	
Designer Email			Contractor Email	
The follo	wing summ	nary of changes must be co	mpleted by the a	pplicant prior to approval
<u>for plan r</u>	evision sub	omittals. Additionally, each	sheet of revised	plans shall include a
delta cha	ange numbe	er with corresponding cloud	<u>led area to be ve</u>	rified by staff during the
<u>plan revi</u>	ew complet	teness check process prior	to submittal.	
SHEET	SUMMARY OF CHANGES			



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SHEET	SUMMARY OF CHANGES CONTINUED				