



## Town of Southwest Ranches

Building Department  
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# Revision Cover Sheet

**Fill out the information below.**

DATE: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PERMIT No. \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

PHONE No.: \_\_\_\_\_

Provide a complete the description for this revision: \_\_\_\_\_

<b>Please check the appropriate discipline to review your submittal.</b>				
<input type="checkbox"/> STRUCTURAL		Approved:	Disapproved:	Disapproved
		Date :	Date:	Date:
Comments from Structural Plans Examiner:				
<input type="checkbox"/> MECHANICAL		Approved:	Disapproved:	Disapproved
		Date :	Date:	Date:
Comments from Mechanical Plans Examiner:				
<input type="checkbox"/> PLUMBING		Approved:	Disapproved:	Disapproved
		Date :	Date:	Date:
Comments from Plumbing Plans Examiner:				
<input type="checkbox"/> ELECTRICAL		Approved:	Disapproved:	Disapproved
		Date :	Date:	Date:
Comments from Electrical Plans Examiner:				
<input type="checkbox"/> FIRE PREVENTION		Approved:	Disapproved:	Disapproved
		Date :	Date:	Date:
Comments from Fire Prev. Plans Examiner:				