



COMMUNITY DEVELOPMENT AGENCY
BUILDING AND SAFETY DIVISION

DESIGN CHANGE SUBMITTAL FORM

Design Change - term used when there is a change in the approved and/or issued plan or permit and updated plans are re-submitted for re-review / re-approval of an Issued Electronic or Paper Plan permit.*

Design Change plans must be in same format as previously approved - Electronic with Electronic and Paper with Paper

Project Address: _____

APN: _____ - _____ **Permit # ('s):** _____ **3rd Party Review**

Design Change Delta (Δ) Number: _____ **Delta (Δ) Date:** _____ / _____ / _____

Person Submitting/Contact Name (print): _____ **Date:** _____

Contact Number: () _____ **Contact Email:** _____

| CHECK ALL THAT APPLY | |
|---|--|
| New Part A Application required when update is: | No new Permit Application required when update is: |
| <input type="checkbox"/> Added / new work outside the scope of what was previously approved in existing permit | <input type="checkbox"/> Changes within the scope of work of what was previously approved in existing permit |
| <input type="checkbox"/> Added square footage, new floor/living area | <input type="checkbox"/> Structural or interior changes to approved existing |
| <input type="checkbox"/> Change in height of structure/roof | If yes to any of the above, then: Updated plans or plan sheets (<i>paper-2 sets</i>) & a. Updated Site Plan/Cover Plan Sheet – (<i>if Site Plan is affected by change</i>) b. All changes clouded, Sheet # Indexed c. Delta (Δ) Number & date |
| If yes to any of the above, then: New complete sets of plans with d. New Site Plan/Cover Plan Sheet e. All changes/updates clouded f. Delta (Δ) #, date, Sheet # (s) Indexed | |

Please describe all changes:

I am submitting the following updated Plan Sheet(s)

Plan Change – Site or Floor Plan—Plan sheet(s): _____

Plan Change – Added Floor Area—Plan sheet(s): _____

Plan Change – Ext. Elevations—Plan sheet(s): _____

Plan Change – Int. Cross-Sections—Plan sheet(s): _____

Structural Changes—Plan sheet(s): _____

I verify that the updated plan sheet(s) listed above meet the following requirements: (*Please initial below*)

_____ All changes on updated and/or new plan sheet(s) have been clouded

_____ All clouded changes are identified with a numbered delta/change (Δ) & change date

_____ Updated plan sheet/page number(s) correspond with original approved plan sheet/page number(s)

_____ Electronic – Each updated plan sheet File Name is SAME EXACT originally submitted File Name



COMMUNITY DEVELOPMENT AGENCY
BUILDING AND SAFETY DIVISION

INTER- DEPARTMENTAL TRANSMITTAL – DESIGN CHANGE

****For Office Use Only****

Project Address: _____

Date: _____

Permit Number(s): _____

3rd Party Review

Correction / Modification / Design Change Δ Number: _____

Δ Date: _____

| | |
|---|---|
| FROM: (_____) | |
| <input type="checkbox"/> TO PLANNING: (_____) | <input type="checkbox"/> TO LD / DPW: (_____) |
| <input type="checkbox"/> Stamp/Signature Required <input type="checkbox"/> Approval Required | <input type="checkbox"/> Stamp/Signature Required <input type="checkbox"/> Approval Required |
| <input type="checkbox"/> Collated <input type="checkbox"/> Not Collated <input type="checkbox"/> Issued File Included | <input type="checkbox"/> Collated <input type="checkbox"/> Not Collated <input type="checkbox"/> Issued File Included |
| Comments: | Comments: |
| | |
| <input type="checkbox"/> TO BUILDING: (_____) | <input type="checkbox"/> TO EHS: (_____) |
| <input type="checkbox"/> Stamp/Signature Required <input type="checkbox"/> Approval Required | <input type="checkbox"/> Stamp/Signature Required <input type="checkbox"/> Approval Required |
| <input type="checkbox"/> Collated <input type="checkbox"/> Not Collated <input type="checkbox"/> Issued File Included | <input type="checkbox"/> Collated <input type="checkbox"/> Not Collated <input type="checkbox"/> Issued File Included |
| Comments: | Comments: |
| | |

| DESIGN CHANGE ROUTING INSTRUCTIONS | |
|--|---|
| <u>MINOR CHANGES</u> – <i>small change with-in scope and/or requiring minimal/quick review</i> | <u>MAJOR CHANGES</u> – <i>big changes requiring significant review and/or new permit (May not be moved to front on plan review list)</i> |
| Minor Change submittal routing: 1. Planning, when necessary 2. Plan Reviewer(s) | Major Change submittals routing: 1. Plans route to Planning if Site Plan or exterior chng 2. Route to other Plan Reviewer(s) affected by change |

| ADDITIONAL REVIEW / FEES USE ONLY | | | |
|--|--------------------|-------------|--|
| Department | Approved By | Date | Fees Due |
| Land Development / DPW | | | <input type="checkbox"/> Addtl Fee \$ _____ <input type="checkbox"/> Encr Prmt \$ _____ |
| Building | | | <input type="checkbox"/> Overtime \$ _____ <input type="checkbox"/> Other Fee \$ _____ |
| Planning | | | <input type="checkbox"/> Minor Fee \$ _____ <input type="checkbox"/> Major Fee \$ _____ |
| Environmental Health Services | | | \$ _____ |

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****See Other Side – Turn Over****