



# RESUBMITTAL - ALL BUILDING PERMIT RESUBMITTALS

Community Development Department

Building Division

1600 First St., PO Box 650

Napa, CA 94559-0660

OFFICE USE ONLY
PERMIT#: _____
RECEIVED BY _____ DATE RECEIVED _____

This form must be filled out and returned with all the information requested in the comment letter(s). **All changes must be clearly identified on the plans by revision cloud and delta, and on the response letter.**

Please resubmit three (3-6) new complete, signed and stamped sets of plans. Partial or incomplete resubmittals will not be accepted.

**PROJECT NAME:** \_\_\_\_\_

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

**PERMIT #:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Response to** (check all that apply):  BUILDING  PUBLIC WORKS  PLANNING  FIRE DEPT

**PRIMARY CONTACT** All communication from our office will be made to this person via email.

Contact Name: \_\_\_\_\_ Firm/License#: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

I represent the  Owner  Contractor

Please list any additional changes to the plans that are not in response to comments. Use a separate page if necessary.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

I understand that the information provided clearly represents all the revisions to the resubmittal. Any changes to the plans and documents that are not clearly clouded may cause the plan check to be delayed. Non-response to comments will generate additional comment letters.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_