



CITY OF WESTLAKE
 Building Department
 4001 Seminole Pratt Whitney Road Westlake, Florida 33470
 Phone: (561) 530-5880 www.westlakegov

Building Department
Plan Revision Request

DATE SUBMITTED: _____

Page Count: _____

TO BE FILLED OUT BY OWNER, CONTRACTOR AND/OR AUTHORIZED AGENT

NAME: _____ PHONE: _____

PERMIT NUMBER: _____

ADDRESS: _____

If multiple permit numbers attach additional sheet check box if applicable

CONTACT PERSON: _____ CONTACT PHONE NUMBER: _____

FAX NUMBER: _____ Number of set of plans submitted: _____

E-MAIL ADDRESS:

Original Permit Request: _____ Commercial Residential

Details of requested changes:

Revision will affect: Check **ALL** that apply.

- | | | | |
|--|---|-------------------------------------|----------------------------------|
| <input type="checkbox"/> Building Foot Print | <input type="checkbox"/> Square Footage | <input type="checkbox"/> Structural | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Fire |
| <input type="checkbox"/> Lot Change | <input type="checkbox"/> Other: _____ | | |

Applicant Signature: _____