



REVISION COVER SHEET

PROJECT NAME:

DATE

PERMIT NUMBER

REVISION VERSION

- **DIGITAL SIGNATURES ARE ACCEPTABLE, BUT MUST BE FLATTENED PRIOR TO SUBMITTING**
- **SUBMITTALS MUST BE STAMPED BY THE DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE (OSSC 107.3.4)**
- **REVISED PLANS MUST BE FULL SETS, NO SLIP-SHEETS.**
- **PLANS MUST BE IN .PDF FORMAT. PDF-A WILL BE REFUSED.**

SUMMARY OF CHANGES

ADDITIONAL NOTES

SUBMITTED BY
