



**Building Division**  
 420 Litho Street, Sausalito, CA 94965  
 415-289-4128 (P) / 415-339-2256 (F)

**CONSTRUCTION DRAWINGS  
 RESPONSE / REVISION FORM**

**Project Address:** \_\_\_\_\_  
**Revision Date:** \_\_\_\_\_  
**Submitted By:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Agency PC / Permit #:** \_\_\_\_\_  
**CSG PC #:** \_\_\_\_\_  
**Submittal Date:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**INSTRUCTIONS FOR APPLICANT**

- Identify the current changes made on your revised plans by checking the boxes below.
- Provide a written response on the “Response” line following each comment identified on the “Correction List”. If additional space is needed, add a separate page with your response and identify each response with the corresponding comment number. In addition, provide a written response to comments by City Staff and Fire District Staff, if applicable, on a separate page linking each response to the corresponding comment number.
- If the revisions will affect any component of the exterior appearance, revised architectural elevations must be submitted.
- Revised plans must notate the changes on the plan with bubbles. Only the most recent changes should be bubbled. Bubbles must be removed from previous changes.
- Submit the same number of copies of revised plans as originally submitted, unless otherwise directed by City Staff.
- Failure to provide all relevant information may result in the delays in the review of your revised plans or issuance of your Building Permit.

**IDENTIFY CHANGES SHOWN ON REVISED PLANS**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Rough Frame        | <input type="checkbox"/> Electrical                              | <input type="checkbox"/> Foundation           |
| <input type="checkbox"/> Section Detail     | <input type="checkbox"/> Plumbing                                | <input type="checkbox"/> Floor Plan           |
| <input type="checkbox"/> Footing            | <input type="checkbox"/> Mechanical                              | <input type="checkbox"/> Setback              |
| <input type="checkbox"/> Structural Details | <input type="checkbox"/> Structures in Easement                  | <input type="checkbox"/> New Floor Area       |
| <input type="checkbox"/> Structural Calcs   | <input type="checkbox"/> Change in Roof/Ceiling                  | <input type="checkbox"/> Change in Elevations |
| <input type="checkbox"/> _____              | <input type="checkbox"/> Change in Number or Location of Windows |   |

Will the revisions affect any component of the structure’s exterior appearance?  Yes  No

Did your project require Planning Commission approval?  Yes  No

I, \_\_\_\_\_, do hereby declare under penalty of perjury that the information on this form and its attachments are true, complete, and correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_