



# Revision Submittal Request

**Clark County Department of Building**  
**4701 W. Russell Road ~ Las Vegas NV 89118 ~ (702) 455-3000**

Original Application/Project No.: \_\_\_\_\_ Revision No.: \_\_\_\_\_

**This form must be completed by the contractor, developer, architect, engineer or owner upon submitting a request for revisions to the Plans Examination division. Your revision cannot be processed without this information.**

**NOTE: THIS WORKSHEET IS FOR REVISIONS TO PLANS THAT HAVE PREVIOUSLY BEEN APPROVED. IF YOU ARE ADDING ADDITIONAL SCOPE OF WORK, A NEW PERMIT WILL BE REQUIRED.**

## ORIGINAL PROJECT INFORMATION

Project Address: \_\_\_\_\_  
(Include suite/space no. or letter designation if applicable.)

Project Name: \_\_\_\_\_

## CONTACT INFORMATION

Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

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

E-Mail Address: \_\_\_\_\_

## DESCRIPTION

Provide a comprehensive description of the revision being submitted:

Sheet & detail numbers, if applicable:

### ITEM TYPE

### FOR 4G;>6;@9 67B3DF? 7@F USE ONLY

Check the types of revisions being submitted.

|                        |                        |             |               |
|------------------------|------------------------|-------------|---------------|
| Alternate Method       | Alternate Method       | DVD: _____  | Fee: \$ _____ |
| Architectural          | Architectural          | Time: _____ | Fee: \$ _____ |
| Civil                  | Civil                  | Time: _____ | Fee: \$ _____ |
| Electrical             | Electrical             | Time: _____ | Fee: \$ _____ |
| Exit Plan              | Exit Plan              | Time: _____ | Fee: \$ _____ |
| Fire Protection Report | Fire Protection Report | Time: _____ | Fee: \$ _____ |
| Geotechnical/Grading   | Geotechnical/Grading   | Time: _____ | Fee: \$ _____ |
| Mechanical             | Mechanical             | Time: _____ | Fee: \$ _____ |
| Plumbing               | Plumbing               | Time: _____ | Fee: \$ _____ |
| Smoke Control Diagram  | Smoke Control Diagram  | Time: _____ | Fee: \$ _____ |
| Steel Fire Proofing    | Steel Fire Proofing    | Time: _____ | Fee: \$ _____ |
| Structural             | Structural             | Time: _____ | Fee: \$ _____ |
| Zoning                 | Zoning                 | Time: _____ | Fee: \$ _____ |

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**ZONING**

| YES | NO | ITEM DESCRIPTION  |
|-----|----|---|
|     |    | Change of use   |
|     |    | Apartment/condominium unit reconfiguration (increase/decrease of unit square footage)               |
|     |    | Change in any reflective materials  |
|     |    | Parking   |
|     |    | Landscaping   |
|     |    | Curb cut locations  |
|     |    | Parcel accessibility  |
|     |    | On-site circulation   |
|     |    | Trash enclosure location  |
|     |    | Area lighting (change of location or height)  |
|     |    | Any exterior elevation changes  |
|     |    | Wall/fence (location/height)  |
|     |    | Building setbacks   |
|     |    | Building footprint*   |
|     |    | Scope of site improvements (increase/decrease)  |
|     |    | Building square footage (increase/decrease)   |
|     |    | Site plan changes   |
|     |    | Lot dimensions  |
|     |    | Basement added/deleted  |
|     |    | Location of building on lot (increase/decrease building setback from property line or right-of-way) |
|     |    | Increase/decrease in height of structure  |
|     |    | Obscure windows (change from)   |
|     |    | Change of roof pitch  |
|     |    | Change in color of exterior   |
|     |    | Addition of cooking facilities  |
|     |    | Change to floor plan  |
|     |    | Other: _____  |

**ARCHITECTURAL**

| YES | NO | ITEM DESCRIPTION   |
|-----|----|--|
|     |    | Alterations or modifications to architectural plans  |
|     |    | A narrative description of all changes is provided and such changes are clearly indicated on plans with a cloud and delta number |
|     |    | Any alternations in the egree system   |
|     |    | Any alternations in the amount of bathrooms or types of bathrooms  |
|     |    | Any alternations to the exterior walls or roof   |
|     |    | Other: _____   |

**STRUCTURAL**

| YES | NO | ITEM DESCRIPTION   |
|-----|----|--|
|     |    | Alterations or modifications to structural plans   |
|     |    | Alterations or modifications to structural calculations  |
|     |    | Submitted plans are wet stamped by a Nevada-licensed engineer?   |
|     |    | Submitted calculations are wet stamped by a Nevada-licensed engineer?  |
|     |    | Deferred submittal items have a shop drawing review stamp "without exception" from the Engineer of Record?                       |
|     |    | A narrative description of all changes is provided and such changes are clearly indicated on plans with a cloud and delta number |
|     |    | Structural changes have been coordinated with and are compatible with the requirements of other disciplines                      |
|     |    | Other: _____   |

\* NOTE: Any increase in building square footage or additional height will require a supplemental permit.

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**PLUMBING**

| YES | NO | ITEM DESCRIPTION                               |
|-----|----|--|
|     |    | Alterations or modifications to plumbing plans |
|     |    | Water or sewer line                            |
|     |    | Faucet or facility                             |
|     |    | Other: _____                                   |

**MECHANICAL**

| YES | NO | ITEM DESCRIPTION                                 |
|-----|----|--|
|     |    | Alterations or modifications to mechanical plans |
|     |    | HVAC system                                      |
|     |    | Other: _____                                     |

**ELECTRICAL**

| YES | NO | ITEM DESCRIPTION   |
|-----|----|--|
|     |    | Alterations or modifications to electrical plans           |
|     |    | Electrical outlets, lights, switches, panels or generators |
|     |    | Electric wiring or conduit                                 |
|     |    | Electric Sign  |
|     |    | Other: _____   |

**GRADING**

| YES | NO | ITEM DESCRIPTION                                    |
|-----|----|---|
|     |    | Building square footage (increase/decrease)         |
|     |    | Alterations or modifications to civil/grading plans |
|     |    | Site plan changes                                   |
|     |    | Basement  |
|     |    | Landscaping   |
|     |    | Retaining wall (location/height)                    |
|     |    | Drainage facilities                                 |
|     |    | Soil report recommendations                         |
|     |    | Foundations/footings                                |
|     |    | Other: _____  |

**\* NOTE: Any increase in building square footage or additional height will require a supplemental permit.**