



DEPARTMENT OF BUILDING & SAFETY

REVISION/DEFERRED SUBMITTAL APPLICATION

333 North Rancho Drive, Las Vegas NV 89106-3703

Phone: (702) 229-6251 Fax: (702) 382-1240

NOTE: THIS APPLICATION IS FOR PLAN REVIEWS PERFORMED ON A HOURLY BASIS ONLY. IF YOU ARE ADDING ADDITIONAL SCOPE OF WORK TO AN EXISTING PERMIT OR TO AN EXISTING BUILDING, A NEW PERMIT APPLICATION IS REQUIRED!

THE FOLLOWING INFORMATION MUST BE COMPLETED BY THE CONTRACTOR, DEVELOPER, ARCHITECT, ENGINEER OR OWNER:

PROJECT INFORMATION

REVISION #: _____ PARENT (ORIGINAL) PROJECT # _____

PROJECT INFORMATION

Project Name: _____

Project Address: _____
(Include Suite/Space No. or Letter Designation if Applicable)

CONTACT INFORMATION

Name: _____ Company Name: _____

Mailing Address: _____

City: _____ State/Zip: _____ Phone: _____

Email: _____ Fax: _____

DESCRIPTION

Detailed description of work and construction documents being submitted: _____

For SFD Tracts provide all affected lot numbers: _____

ITEM TYPE

CHECK THE PLAN TYPES SUBMITTED WITH THIS APPLICATION:

- Architectural Structural Mechanical Plumbing Electrical
- Planning Fire Department

HOURLY RATES PER CITY OF LAS VEGAS ADMINISTRATIVE CODE (1 HOUR MINIMUM)

ARCHITECTURAL SIGNATURE: _____

TIME: _____

STRUCTURAL SIGNATURE: _____

TIME: _____

MECHANICAL SIGNATURE: _____

TIME: _____

PLUMBING SIGNATURE: _____

TIME: _____

ELECTRICAL SIGNATURE: _____

TIME: _____

PLANNING SIGNATURE: _____

TIME: _____

FIRE DEPARTMENT SIGNATURE: _____

TIME: _____

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this application..

Contractor or Agent / Owner Date

Building Department/Permit Technician Date

TOTAL FEES DUE: \$ _____

Permit Expires 180 Days After Abandonment of Work
Permits expire when no inspection has been approved for any 180-day period after the permit has been issued.