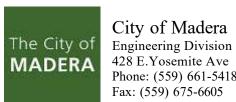
ENGINEERING PLAN REVIEW SUBMITTAL SHEET



PLANNING DEPARTMENT ENTITLEMENT NUMBER							
CUP		GPA					
PPL		REZ					
SPR		SPL					
TPM		TSM					
OTHEI	₹						

IVIADERA	Phone: (559) 661-5418 Fax: (559) 675-6605		PPL	REZ					
			SPR	SPL					
EPRS#			TPM	TSM					
			OTHER_						
Assessor's Parcel Num	ober (APN):								
	2	2							
	☐ New (Never Submitted before)		Corrections						
Project Type:	□ Private Development		ubdivision						
Project Description:									
Project Name:									
Site Address:	Site Address: (If no address is available give general location)								
ENGINEER									
Engineering Firm:	Engineering Firm:Responsible Engineer:								
Address:	.ddress:Office Phone Number:								
Cell Phone Number:_	Cell Phone Number:Email Address:								
Note: It is City policy to contact Responsible Engineer regarding plan review comments									
	OWNER	/DEVELO	OPER						
Nome									
			o.cc pl						
	Office Phone Number:								
Cell Phone Number:Email Address:									
Signature		Date	·						
	BELOW TO BE COMP	LETED	BY CITY STAFF						
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Plan Check Fee: \$									