



# SANTA CLARA FIRE DEPARTMENT

## FIRE PREVENTION AND HAZARDOUS MATERIALS DIVISION

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## PLAN SUBMITTAL MODIFICATION

**The information noted below is required to properly process your plan submittal request. Without the information your submittal cannot be processed.**

1. Type of Submittal     **Revision**     **Resubmittal**     **Addendum**     **As-built**
2. Fire Department permit number    **FIR20** \_\_\_\_\_ - \_\_\_\_\_
3. Job Address: \_\_\_\_\_
4. Building Department permit number (if applicable)    **BLD20** \_\_\_\_\_ - \_\_\_\_\_
5. Fire Department member who requested the Revision/Resubmittal/Addendum/As-built?  
**Name:** \_\_\_\_\_                      **Date (if known):** \_\_\_\_\_
6. Name of individual to contact who would be able to discuss this submittal:  
**Name:** \_\_\_\_\_                      **Title:** \_\_\_\_\_  
**Company:** \_\_\_\_\_                      **Contact #:** \_\_\_\_\_
7. Summarize the scope of work contained in this Revision, Resubmittal, Addendum, or As-built (Please be descriptive as possible, or write see attachment) \_\_\_\_\_  
\_\_\_\_\_  
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<b>For Office Use Only</b>			
Date:	Initials:	<input type="checkbox"/> No Comments	<input type="checkbox"/> See Comments Below
Comment(s): _____			
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