City of Coral Gables
Development Services Department

PLANS ROUTING FORM

PLEASE COMPLETE THE FOLLOWING INFORMATION SO THAT WE MAY ROUTE YOUR PLANS ACCORDINGLY:

DATE OF RE-SUBMITAL: _______________________________

PERMIT OR APPLICATION NO.: _______________________________

RE SUBMITTED BY: _______________________________________

CONTACT PHONE NO.: _______________________________

☐ NEW SHEETS ADDED _______________________________________
   (If Site Plan or elevations are on added sheets, plans must be submitted to the Board of Architects for approval)

☐ DID NOT ADD NEW SHEETS

RECEIVED BY: ________________________________

☐ BUILDING ☐ MECHANICAL

☐ CONCURRENCE ☐ PLUMBING

☐ ELECTRICAL ☐ PUBLIC WORKS

☐ FIRE ☐ STRUCTURAL

☐ HISTORICAL ☐ STRUCT. CONSULTANT ______________

☐ INVOICING ☐ ZONING ____________________________

COMMENTS:

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8/16/2017