



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

REVISIONS – CORRECTIONS REQUEST FORM
MUST BE SUBMITTED FOR ALL CORRECTIONS AND REVISIONS

DATE: _____ PERMIT NUMBER: _____

JOB ADDRESS: _____

PLEASE CHECK ONE OF THE FOLLOWING:

- ☐ CONDITION OF INSPECTION APPROVAL (Needed for an inspection)
- ☐ CONDITION OF PERMIT APPROVAL: (Corrections/Permit not issued, in review process)
- ☐ REVISIONS (Changes to an issued permit)

******ALL PLAN REVISIONS MUST BE HIGHLIGHTED OR CLOUDED ON DRAWING******

ALL REVISED PAGES ARE REQUIRED TO BE INSERTED IN FIELD PERMIT SET

DESCRIPTION OF REVISION(S): _____

DOES REVISION(S) CHANGE THE VALUE OF CONSTRUCTION? YES _____ NO _____ VALUE \$ _____

INCREASED CONSTRUCTION VALUE WILL INCREASE PERMIT FEES AND MUST BE PAID AT TIME OF APPROVAL

CONTACT NAME: _____ SIGNATURE: _____

PHONE NUMBER: _____ FAX NUMBER: _____

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FOR OFFICE USE ONLY:

Reviewed by: _____ Date: _____ Approve _____ Deny _____

Additional conditioned space _____ sq. ft. @ \$104.65 per sq. ft. _____ x 2% = _____

Additional non-conditioned space _____ sq. ft. @ \$ 48.90 per sq. ft. _____ x 2% = _____

Other declared value increase (must be based on value not cost) _____ x 2% = _____

Other additional fees: _____ Revision review fee: _____ Pages @ \$25.00/Page _____

Revisions to SFR permits (non department request) review fee: _____ Pages @ \$50.00/page _____

Radon Fee _____ Professional Regulation Fee _____ Road impact assessment _____

TOTAL ADDITIONAL BUILDING PERMIT FEE \$ _____

Applicant notified by: _____ Date: _____