



Permit # \_\_\_\_\_

Change of Plan # \_\_\_\_\_

Initial Date Submitted: \_\_\_\_\_

*City of Margate, Florida*  
*Building Department*

Change of Plan Submittal Cover Sheet

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

**NOTE: In order for the Building Department to process Plan changes promptly, the individual who submits the changes should make a sincere effort to provide the following information accurately.**

Description of Change: \_\_\_\_\_

Verified cost of this change \$ \_\_\_\_\_ Submit copy of change order.

1. I verify that the changes/revision have been clouded & dated by the Architect/Engineer of Record
2. I verify that this change/revision affect the following inspections, which will have to be recalled. \_\_\_\_\_
3. I am aware that if this submittal is not complete, the Building Department may return it without review, and takes no responsibility for the associated delays.

Acknowledged that I have read the above statements. \_\_\_\_\_

Check Applicable Discipline For Review	Sheets Affected	Disipline	Approved	Denied	Date	Initial	Revision Cost
		Zoning					
		Structural					
		Electric					
		Plumbing					
		Mechanical					
		Fire					

Contractor: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone # \_\_\_\_\_

Fax # \_\_\_\_\_

**NOTE: Only one form required per Change of Plan. No additional form required when making revisions to a change of plan that has already been submitted to this office and is pending approval.**