

INITIAL PROJECT SUBMITTAL

RIGHT-OF-WAY CONSTRUCTION PERMIT (RCP)

CASE NO.: _____ RECEIVED BY: _____ DATE: _____ engineering\subdivid\forms\IPS.xls

<i>STREET</i>	<i>SEWER / STORM DRAIN</i>	<i>TRAFFIC SIGNAL</i>	<i>LANDSCAPE</i>	<i>STREET (RESORT)</i>	<i>TELECO / U/G ELECTRICAL OTHER UTILITIES</i>	<i>PLAN REQUIREMENTS</i>
14	10	11	8	13	11 (a)	Number of plans (folded by 9" x 12")
24" X 36"						Sheet size
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name, address & phone number of developer and engineer
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site address
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Title block description (for indexing)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Quantities
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	City bench mark with complete description and elevations
						DEPOSITS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Checking / Inspection deposi (DTF# _____)
						MISCELLANEOUS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Project Description Transmittal letter

(a) Routing subject to change for specific projects

Plan Checker TRI _____
 MELANIE _____
 JOSE _____
 ADRIAN _____
 KEITH _____
 RAUL _____