



# CITY OF MURRAY PLAN REVIEW APPLICATION

|                         |              |   |
|-------------------------|--------------|---|
| NAME OF PERSON _____    | DATE: _____  | CHECK HERE IF BLDG.                         |
| SUBMITTING PLANS: _____ | PHONE: _____ | <input type="checkbox"/> CODE REVIEW FEE IS |
| COMPANY: _____          | (____) _____ | INCLUDED                                    |

PROJECT NAME: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_

Please indicate No. and Street or Highway (DO NOT PUT P.O. BOX OR POSTAL ROUTE)

ATTN: \_\_\_\_\_

OWNER: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

No./Street                      City                      State                      Zip

ATTN: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

No./Street                      City                      State                      Zip

IS ARCHITECT PROVIDING CONSTRUCTION CONTRACT ADMINISTRATION? YES \_\_\_\_\_ NO \_\_\_\_\_

ATTN: \_\_\_\_\_

ENGINEER: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

No./Street                      City                      State                      Zip

ATTN: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

No./Street                      City                      State                      Zip

### Building Information

USE OF BUILDING(S) (I.e.: sales, assembly, factory, etc.) \_\_\_\_\_ NUMBER OF BUILDINGS IN SUBMITTAL: \_\_\_\_\_

THIS PROJECT IS: \_\_\_\_\_ NEW BUILDING    \_\_\_\_\_ NEW ADDITION    \_\_\_\_\_ RENOVATION ONLY    \_\_\_\_\_ RENOVATION & ADDITION

TOTAL SQ. FT. IN NEW PROJECT: \_\_\_\_\_ NUMBER OF LEVELS (Including Basement) \_\_\_\_\_

TOTAL SQ. FT. IN EXISTING BUILDING: \_\_\_\_\_

DATE CONSTRUCTION TO BEGIN: \_\_\_\_\_ ESTIMATED COMPLETION DATE: \_\_\_\_\_

### Type of Submittals

| BUILDING SUBMITTALS                        | SHOP DRAWING SUBMITTALS                         |
|--|---|
| BCE  | (Check what type of evaluations are requested.) |
| Full Building Approval _____               | Suppression System _____                        |
| Site & Foundation Approval _____           | (Sprinkler, CO2, Etc.)                          |
| Partial Evaluation: (please specify) _____ | Alarm Systems _____                             |
| PLBG.                                      | Boiler _____                                    |
| Plumbing Approval ONLY _____               | Bleachers _____                                 |
| Water Supply Approval _____                | Range Hood _____                                |
| Waste Water Approval _____                 | Fuel Tank _____                                 |
| Other: (please specify) _____              | Elevator _____                                  |
| _____                                      | Pool _____                                      |
| _____                                      | Truss _____                                     |