

Building Codes Division
Development Services Building
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DATE RECEIVED:

BUILDING CODES DIVISION REVISION TRANSMITTAL

Please complete this form when submitting information for plan review responses and other project revisions. This form, and the information it provides, helps the review process and allows us to track all the revisions related to your project.

TO: _____

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ATTACHED ARE THE FOLLOWING ITEMS:				
Copies:	Description:	cription: Copies: Description:		
	Additional set(s) of plans.		Revisions:	
	Cross section(s) and details.		Wall bracing and/or lateral analysis	
	Floor/roof framing.		Basement and retaining walls.	
	Beam calculations.		Engineer's calculations.	
	Other (explain):			
Briefly des	scribe the revisions or additio	nal informat	ion being submit	rted: