



City of San Dimas

Building and Safety Division

Original Permit # _____

245 E. Bonita Avenue

Phone: (909) 394-6260 Email: building@sandimasca.gov

REVISION APPLICATION

PROJECT ADDRESS: _____

APPLICANT NAME: _____ PHONE #: _____

APPLICANT E-MAIL: _____

APPLICANT RELATIONSHIP: Owner ☐ Contractor ☐ Architect ☐ Other ☐

Have previous revisions requests been submitted? NO YES If yes, how many? _____

Brief overview of changes: _____

REVISIONS WILL NOT BE ACCEPTED UNLESS ALL REQUIRED ITEMS LISTED BELOW ARE SUBMITTED TO BUILDING AND SAFETY FOR REVIEW.

1. A detailed, itemized list is to be printed on the first sheet of the revised plans with the appropriate delta number and date, as well as the original permit number for the project. The individual revision must be clouded with the delta number to match the itemized list.
2. A separate letter with an itemized list noting the page numbers effected by the revisions and a detailed explanation of the revisions must be provided.
3. Two new sets of the revised plans are to be submitted. They must be the same size as the original plans and, if applicable, they must be stamped by the professional of record. Please only submit pages that indicate changes from the original plans.

NOTICE: If your revision submittal is in response to field corrections issued by a City Inspector, you must provide the correction list and your response on a separate sheet. Failure to provide this document will result in the rejection of your submittal.

SUBMITTAL SAMPLES

ITEMIZED LIST			
Project & Revision	Date	Rev	Description
BD3720547 (Rev.1)	2/19/2025		Customer Revisions

SHEET INDEX			
Sheet #	Description	Rev	Date
A-1	Floor Plan		2/19/2025
A-2	Building Envelope Detail Sheet		2/19/2025
T-24	Energy Forms		2/19/2025