



Community Development Department

Building Construction Division

18400 Murdock Circle | Port Charlotte FL 33948
 Building Phone: 941.743.1201 | Building Fax: 941.764.4907
 Zoning Phone: 941.743.1964 | Zoning Fax: 941.743.1598
 PermitResubmittal@CharlotteCountyFL.gov
 CharlotteCountyFL.gov

For Office Use Only

Permit Number:

2 0 _____

Application Date:

CSR: _____

Plans Change or Resubmittal Request Form

Current Permit Status: Applied for Issued

Permit Number: _____ Current Contractor: _____

Job Site Address: _____

Email Address: _____ Phone Number for Pick up: _____

- Corrections to Comments
- Plans Change (after issuance) Inspection Report (after issuance)
- Other (please specify) _____

Please indicate divisions requiring review below:

- ROW
- Mechanical Plans (Commercial Only)
- Addressing
- Electrical Plans (Commercial Only)
- Zoning
- Plumbing Plans (Commercial Only)
- Building Plans
- Health Building Review
- CCU
- Tree Review
- Fire
- Natural Resources

Description of Submittal _____

For Office Use Only (Reviewer Please initial)

	Reviewer	Date	A/R		Reviewer	Date	A/R
ROW <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Mechanical Plans (Commercial Only) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Addressing <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Electrical Plans (Commercial Only) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Zoning <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Plumbing Plans (Commercial Only) <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Building Plans <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Health Building Review <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CCU <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Tree Review <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fire <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Natural Resources <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>