City of San Juan Capistrano
Development Services Department
32400 Paseo Adelanto
San Juan Capistrano, CA 92675
Phone: (949) 443-6347
Email: building@sanjuancapistrano.org
www.sanjuancapistrano.org/building

REVISION APPLICATION

FOR OFFICE USE ONLY	
REVISION #:	
PLAN REVIEWER:	
SUBMITTAL DATE:	
TARGET DATE:	

COMPANY NAME:
APPLICANT NAME:
CONTACT PHONE #:
EMAIL ADDRESS

PERMIT NUMBER:
JOB ADDRESS:

FOR OFFICE USE ONLY
DEPARTMENT APPROVALS REQUIRED:

BUILDING:	☐ YES	☐ NO
PLANNING:	☐ YES	☐ NO
ENGINEERING:	☐ YES	☐ NO
SMWD:	☐ YES	☐ NO
OCFA:	☐ YES	☐ NO

INSTRUCTIONS:

1. Submit 3 sets of only the revised sheets stapled into sets (do not submit complete set of plans)
2. "CLOUD" the proposed changes on the drawings. Identify changes with a delta number and the date of change.
3. Identify page number(s) on which the revision(s) occur below and provide description of each change. May provide own narrative.

DESCRIPTION OF PROPOSED CHANGES:

PAGE #

☐ 1. _____

☐ 2. _____

☐ 3. _____

☐ 4. _____

☐ 5. _____

_____
APPLICANT SIGNATURE

_____
DATE

FOR OFFICE USE ONLY

APPROVED BY: _____

DATE: _____

TOTAL PLAN CHECKER REVIEW TIME: ☐ **HOURS**

06/18/26 LL