



Village of Palm Springs
Land Development
 226 Cypress Lane
 Palm Springs, Florida 33461-1699
 561-965-4016
 561-439-4132 fax

REVISION REQUEST

Application Date: _____ Primary Permit Number: _____

Sub-Permit Number: _____

Owner Builder/Contractor: _____

Phone: () _____ Fax: () _____

Project Street Address: _____

Proposed Revisions: _____

I understand a fee may be charged for this revision in accordance with the Village of Palm Springs construction permit fee schedule. The fee is required to be paid at the time of pick-up. I understand all revisions dealing with the project must be clearly indicated on the submitted plans.

Signed: _____

OFFICIAL USE ONLY

Hours _____ X \$30.00/hr. = \$ _____

Administrative Fee = \$ _____ \$ 20.00

Total = \$ _____

Receipt Number: _____

Balance Due: _____

Zoning Review: _____

Plans Examiner: _____