



Expedited Plan Review Complete Application Checklist

PROJECT INFORMATION	DATE
Project Name:	
Address:	
Description of Project:	
Applicant:	
Relationship to Project:	Owner <input type="checkbox"/> Design Professional <input type="checkbox"/> Contractor <input type="checkbox"/> Agent for Owner <input type="checkbox"/>
Contact Information:	
X-Team Case Number*	

* This number will be created when the X Team application is accepted.

CHECKLIST	
Building Permit Application/ Permit Number	
Recorded Plat Case Number	
Change of Use Questionnaire / Use Verification Letter	
Complete Set of Drawings	
Zoning Classification / PD Number	
Approved Urban Forestry Case Number	
Design District Overlay <input type="checkbox"/> NA <input type="checkbox"/> Yes	COA Date:
Designated Historic <input type="checkbox"/> NA <input type="checkbox"/> Yes	COA Date:
Multifamily Projects URD/MFD Case Number	
Infrastructure Plan Review Center Approval Project Number	
iSwm Approved / Case Number and Date	
Final SWFMA Approved, if Detention is Required / Number	
Miscellaneous Projects / CFA if Required / Number	
Approved Variances / Encroachment Agreements	
Approved Commercial Grading Permit	
Approved Grease Trap Permit	
Additional Required Permits	

Signature

Date