

CITY OF OAK HILL
BUILDING DEPARTMENT
234 South US Hwy #1
Oak Hill, FL 32759

Phone: (386) 345-3522 Option 3 FAX: (386) 345-1834



Permit Revision Form

| | | | |
|--|--|--|--|
| <input type="checkbox"/> Permit Revision/Plan Modification | | <input type="checkbox"/> Re-Submittal (Response to plan review comments) | |
| Job Information Permit # _____ Address: _____ Scope of Revision/Re-Submittal: _____ _____ _____ _____ | | | |
| Valuation of Revision/Re-Submittal: _____ | | | |
| <input type="checkbox"/> Residential | | <input type="checkbox"/> Commercial | |
| Type of Revision (Check all that apply) <input type="checkbox"/> Building (Change in floor plan, footprint, envelope, and/or exterior) <input type="checkbox"/> Structural <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Other (describe): _____ _____ | | | |
| Contact Information Name: _____ Phone: _____ Fax: _____ Email: _____ | | | |
| Fee: \$ _____ | | | |