

INTAKE SUBMITTAL CHECKLIST SITE PLAN REVISIONS

City Of Austin Development Services Department

505 Barton Springs Blvd. Austin, TX 78704 Ph. 974-2681, 974-7208, or 974-2350
Fax 974-2620

Departmental Use Only:

File Number: _____ Date Issued: _____

Intake Specialist: _____ Date: _____

Information Required for Submittal:

- ___ 1. Completed application form with all appropriate signatures
- ___ 2. Signed Submittal Verification and Inspection Authorization Form
- ___ 3. TIA Fee plus five (5) copies (if TIA is required)
- ___ 4. Summary Letter for Revision
- ___ 5. Plans (24"x36" format **only**) for formal (Refer to completeness check results for required #)
 - ___ One (1) red-stamped, red-lined copy for completeness check
 - ___ One (1) black-lined copy of the revision for completeness check
- ___ 6. 1704 Determination
 - ___ (If B-E is checked provide 1 extra copy of plans & additional fee required @ completeness check)
- ___ 7. Project Description Form
- ___ 8. Flashdrive @ formal submittal- **if required** (Exhibit VII of application must be on flashdrive w/ names of files/layers)
- ___ 9. If applicant indicates they are requesting waiver/ variance(s) on the application, then a letter requesting the waiver/ variance(s) must be submitted as well, plus additional fees if applicable. (*If a Late Hours Permit is required, a waiver of Compatibility Standards must be submitted, if applicable.*)