



**PRINCE WILLIAM COUNTY**  
**Department of Development Services – Building Development Division**

**RESUBMISSION – REVISION COVER LETTER**  
**FOR COMMERCIAL PROJECTS**

Version 2009-01-24

Project Name: \_\_\_\_\_ Date: \_\_\_\_\_

Building Permit / Case #: \_\_\_\_\_ Revisions Inserted by: \_\_\_\_\_

PWC Comment Letter Date: \_\_\_\_\_ Copy Attached?  Yes  No Telephone Number: \_\_\_\_\_

Building Permit Issued?  Yes  No Final Inspection Performed or Scheduled?  Yes  No

*Staff Use Only*  
 Accepted by: \_\_\_\_\_

<b>Trade/ Discipline:</b> Number of sheets each	<b>Specify Reason</b> <ul style="list-style-type: none"> <li>• Review Comment</li> <li>• Inspection Reject</li> <li>• Owner Change</li> </ul>	<b>Revised Sheet Numbers</b> (indicate all sheet numbers being added or revised)	<b>Original Designer Yes/No</b>	<b>Attachments / Description</b> Provide the designer's written explanation/response for all changes as an attachment or briefly describe all changes in space provided below.
BUILDING (Architectural) # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
MECHANICAL # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
PLUMBING # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
ELECTRICAL # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
STRUCTURAL # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
GAS # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
FIRE MARSHAL # of sheets				Designer's written response attached? <input type="checkbox"/> Yes <input type="checkbox"/> No