

Request # _____

ENGINEERING DIVISION - PLAN
REQUEST FORM

Requested Date: _____

Name: _____ Company: _____

Contact Number: _____ Email: _____

Please indicate in detail the information you are requesting. If this is a plan request, indicate the limits of the area you are requesting with street names. Please see the fee schedule below. The approximate time for staff to research your request is as follows:

<u>Types of Request</u>	<u>Days</u>
Plan requests	7-10
Right-of-way	1-2
Centerlines & Benchmarks	1

Information requested:

1. _____

2. _____

3. _____

4. _____

5. _____

Fee Schedule:

Blueprint/Map Reproduction: \$3.00 per sheet
Photo copies: First 5 copies are free; 15¢ per copy thereafter

OFFICE USE ONLY

Date Due: _____ Date Completed: _____

Distribution: Engineering Division
6/2014