

Document Review Request Form

Instructions: This form is to be completed by the project manager and submitted with the documents for a new permit along with a BCO Fee Proposal Form. For projects requiring State Fire Marshal review, also complete and submit an additional DFS Application for Plan Review form. Requests will not be processed until a valid account number or payment is provided.

1. **Action Requested:** Design Review (_____%) or Final Review 100% (for permit)
2. **Funding Department Account #:** _____ **Fee Amount \$:** _____
3. **Submittal Contents** (Provide a complete description, number, and issue date of all items submitted.):

4. **Project Number:** _____ 5. **\$ Value of work:** _____

6. **Project Name:** _____

7. **Electrical panel load calculation required**

8. **Description of work:** _____

9. **FBC Class of Work:** New Repair Alteration Addition Demolition

10. **Project Location & Address:** _____

11. **Building Occupancy Type:** (check all that apply): Other/Special _____

Assembly Business Education Industrial Mercantile Residential Storage

12. **FBC Construction Type:** _____ 13. **Building Area (GSF):** _____

14. **Building Height** _____

15. **Architect / Engineer Name:** _____

E-mail address: _____ Phone Number: _____

Mailing Address: _____

16. **Project Manager (print):** _____

Department: _____ E-mail address: _____

Signature: _____ Date: _____

Phone #: _____

Address: 3528 N. Perseus Loop, Orlando, Florida 32816-3500

Telephone: (407) 823-5323

An Equal Opportunity Affirmative Action Institution