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### Revision Request Form

Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

**Please indicate what you are submitting (check all that apply):**

- Revision of Approved Plans
- Revision of Approved Site Plan
- Engineer's Letter
- Calculations
- Additional Information for file
- Requested by Inspector
- Other: \_\_\_\_\_

Number of Copies: \_\_\_\_\_ Format: \_\_\_\_\_

Additional Information: \_\_\_\_\_

**\*All plans and documents stamped as confidential or proprietary are subject to possible disclosure under the Colorado Open Records Act.**

Office Use Only

Received by: \_\_\_\_\_ Date Received: \_\_\_\_\_ Due Date: \_\_\_\_\_

Planning & Zoning Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Building Department Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Payment Due: \_\_\_\_\_

Payment Date: \_\_\_\_\_