



## **SPOT LOCATION SURVEY** **APPROVAL APPLICATION**

*Submit **TWO (2)** Copies of the Certified Location Survey of the building foundation as constructed in the field for Review*

Date: \_\_\_\_\_ Project Permit Number: \_\_\_\_\_

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

Applicant's Name: \_\_\_\_\_

Applicant's Phone Number: \_\_\_\_\_

Applicant's E-mail Address: \_\_\_\_\_

Applicant's Fax Number: \_\_\_\_\_

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### ***For Staff Use Only:***

**ZONING:**      Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ By:      Date: \_\_\_\_\_

Review Comments:

**ENGINEERING:** Approved: \_\_\_\_\_ Not Approved: \_\_\_\_\_ By:      Date: \_\_\_\_\_

Review Comments:

Review comments submitted to applicant on: \_\_\_\_\_ By: \_\_\_\_\_