



Community Development Dept.
701 Laurel Street
Menlo Park, CA 94025
650.330.6704

PLAN CHECK BY APPOINTMENT

Date Received: _____ Tidemark Number: _____

Appointment Date: _____ Appointment Time: _____

Project Address: _____

Contact Name: _____

Home Tel. #: _____ Office Tel. # _____

Cell Tel. #: _____ Pager #: _____

E-Mail Address: _____

Description of Project: Residential Commercial

REQUIRED FOR PLAN CHECK

General Contractor Information, with Business License and Signature

Sub Permits M E P

Special Inspection Forms – Signed

Fire District Approval

Plan Review Approved By: _____ Approval Date: _____

Notes: _____
