



PROJECT TITLE
 PROJECT SUBTITLE
 PROJECT STREET ADDRESS
 PROJECT CITY, STATE, ZIP


PROJECT NAME


PHASE SUBMISSION


 **CLIENT NAME-L1**
CLIENT NAME-L2
 CLIENT STREET ADDRESS
 CLIENT CITY, STATE, ZIP


Seal & Signature ARCHITECT:  CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #


Seal & Signature MECHANICAL ENGINEER:  CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #


Seal & Signature ELECTRICAL ENGINEER:  CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #


Seal & Signature PLUMBING ENGINEER:  CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #


Seal & Signature SUB-CONSULTANT:  CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

Seal & Signature SUB-CONSULTANT:  CONSULTANT NAME
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 PHONE #

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 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

LIST of DRAWINGS

T-1	TITLE SHEET		
	ARCHITECTURE:	ELECTRICAL:	PLUMBING:
A-X	DRAWING NAME	E-X DRAWING NAME	P-X DRAWING NAME
A-X	DRAWING NAME	E-X DRAWING NAME	P-X DRAWING NAME
A-X	DRAWING NAME		
A-X	DRAWING NAME		
A-X	DRAWING NAME		
A-X	DRAWING NAME		
	MECHANICAL:		
M-X	DRAWING NAME		
M-X	DRAWING NAME		

LOCATION PLAN

SITE PLAN

DOB APPROVAL STAMPS

PROJECT NAME
PROJECT TITLE
 PROJECT SUBTITLE
 PHASE SUBMISSION
 Date: ###/##/20##
 DASNY Project No: #####9999
 Drawing 1 of ###