

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

LIST of DRAWINGS

- T-1 COVER
- ARCHITECTURE**
- A-X DRAWING NAME
- A-X DRAWING NAME
- MECHANICAL**
- M-X DRAWING NAME
- M-X DRAWING NAME

Seal & Signature

ARCHITECT:



CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

Seal & Signature

ELECTRICAL ENGINEER:



CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

Seal & Signature

MECHANICAL ENGINEER:



CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

Seal & Signature

PLUMBING ENGINEER:



CONSULTANT NAME
 STREET ADDRESS
 CITY, STATE, ZIP
 PHONE #

LOCATION PLAN

SITE PLAN

DOB APPROVAL STAMPS

PROJECT NAME
 PROJECT TITLE
 PROJECT SUBTITLE

Date: ##/##/20##

PHASE SUBMISSION

DASNY Project No: #####9999