	City of Harrisburg Planning Services 301 East Willow Street Harrisburg, SD 57032 Phone: 605-767-5011	ENGINEERING PLAN REVIEW APPLICATION
Engineer name:		_ Date:
Engineering firm nam	e:	
Engineer address:		
Engineer email:	Phone:	
Developer name:	P	hone:
Developer address:		
Development name: _		
This Application form	must be accompanied by:	

 $\hfill\square$  Two paper copies and one electronic copy of required Engineering Submittals.

 $\hfill\square$  Three paper and one electronic copy of the construction plans.

I hereby certify that the above information is accurate and correct and that I am authorized to submit this Engineering Plan Review Application.

Applicant's signature

FOR CITY USE ONLY

Date received:	 R
Bate received.	 

Reviewed by: \_\_\_\_\_

Date review comment letters sent: \_\_\_\_\_