

## **City of Harrisburg Planning Services** 301 East Willow Street

Harrisburg, SD 57032 Phone: 767-5010 Fax: 743-2831

## **ENGINEERING PLAN REVIEW APPLICATION**

Engineer name:	Date:
Engineering firm name:	
Engineer address:	
Engineer e-mail address:	Phone:
Developer name:	Phone:
Developer address:	
Development name:	

This Application form must be accompanied by:

□ A non-refundable Review Fee of \$500.00.

- □ Two paper and one electronic copy of required Engineering Submittals.
- □ 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: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

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