

# WVHDF TECHNICAL SERVICES REVIEW REQUEST FORM

To be used for Site Plan, Plans and Specifications, Costing, and/or Construction Contract Reviews

**Instructions:**

Complete the form as applicable to your request. Save the document under another name (perhaps the property address), which will save the inputted information. E-mail the new document to your program representative.

All information noted on this Plan Review Request must be submitted to complete a thorough plan review.

**FAXED COPIES OF THIS FORM WILL NOT BE ACCEPTED; IT MUST BE SUBMITTED ELECTRONICALLY.**

- CHDO Rental     HOME Rental     MLP     SALP     AHFP     WVPRI     NCFP     LIHTC
- Land Development     FAF     USDA 538     NHTF     Other \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Organization Requesting: \_\_\_\_\_ Email: \_\_\_\_\_

Project Name: \_\_\_\_\_

Property Address: \_\_\_\_\_ COUNTY: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Applicant(s): \_\_\_\_\_

**REVIEWING FOR:**

- Rehabilitation     New Construction     Acquisition     Other \_\_\_\_\_

**PLAN REVIEW REQUIREMENTS:**

- |  |   |
|--|---|
| <input type="checkbox"/> Site Development Plan with Topo<br><input type="checkbox"/> Construction Contract with Schedule of Values<br><input type="checkbox"/> Capital Needs Assessment<br><input type="checkbox"/> Phase I Environmental Site Assessment Review | <input type="checkbox"/> Plans and Specifications, including Materials<br><input type="checkbox"/> Costing<br><input type="checkbox"/> Change Orders<br><input type="checkbox"/> Other: _____ |
|--|---|

**PROPERTY DATA:**

- Site Only     Single Family     Multifamily     Year House/Building Constructed

Other (Describe): \_\_\_\_\_

Lot Size: \_\_\_\_\_ Previously disturbed?  In platted subdivision?

Preferred Date: \_\_\_\_\_ Time: \_\_\_\_\_ a.m. \_\_\_\_\_ p.m.

**UTILITIES AVAILABLE**     Natural Gas     Telephone     Electric     Trash Collection

Public Water     Public Sewer     Well     Septic (local Health Department report must be available)

Directions/Instructions

**BELOW IS FOR WVHDF USE ONLY**

Requestor # \_\_\_\_\_ County \_\_\_\_\_ Inspector \_\_\_\_\_

Date Received \_\_\_\_\_ Date Assigned \_\_\_\_\_ Date Completed \_\_\_\_\_