



**WASHINGTON COUNTY, OREGON**  
**COMMERCIAL PROJECT PRE-PLAN REVIEW MEETING**  
**REQUEST FOR APPOINTMENT**

**A Notice to Our Customers:**

The purpose of the mandatory pre-plan review meeting is to allow Building Services staff an opportunity to determine the completeness level of the information you intend to submit for plan review. Once the completeness level has been determined, your plan submittal will be assigned a "plan review queue status" classification of either "INCOMPLETE" or "PENDING." Plan submittals that do not have complete information will be classified as "INCOMPLETE" and will not be placed in the plan review queue. "INCOMPLETE" plan submittals will not be reclassified, or plan reviewed, until such time as enough information has been submitted to consider the submittal complete. Once complete, your plan submittal's queue status will be re-classified to "PENDING," meaning it has been placed in the plan review queue and is awaiting plan review. All plan submittals in the plan review queue are reviewed in chronological order, based on the date it was re-classified to "PENDING" status. In order to meet your scheduling needs, you may request a tentative pre-plan review meeting appointment by filling in the box below, filling in the "CUSTOMER INFORMATION" portion, and returning this form to Building Services. Building Services staff will make every effort to meet with you at the time and date you request.

<b>Requested Meeting Date:</b> _____	<b>Requested Meeting Time:</b> _____	<b>AM / PM (circle one)</b>
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Please understand that; 1) your requested appointment time is not guaranteed, 2) you must receive confirmation of the appointment time, and 3) unless your confirmation was exclusively by telephone, and not fax or e-mail, you must present this form at your appointment. This form will list in the box below marked "FOR WASHINGTON COUNTY USE ONLY," the name and telephone number of the plans examiner who is assigned to your project, and who will confirm your pre-plan review appointment. The plans examiner assigned will be the Washington County Building Services "Project Plans Examiner" (PPX) for your project. The PPX will work with you from the date of your initial pre-plan review meeting, through plan review, and through construction, to the completion of the project. If Building Services cannot accommodate your requested appointment time, you will be contacted by telephone within three (3) working days from the "Intake Date," in order to arrange a different appointment time. If you have indicated a fax number or e-mail address in the "CUSTOMER INFORMATION" box, this form will be returned to you confirming either your requested appointment time, or the arranged appointment. If you do not list a fax or e-mail number on this form, you will be contacted by telephone to discuss your appointment. You will be contacted within three (3) working days from date you submit this pre-plan review meeting appointment request form to Building Services. Please complete the "CUSTOMER INFORMATION" portion of this form and submit by fax using either 503-846-3993 or 503-846-8111. You may also submit this form in person, or by mail, to Building Services. Our office is located at the address indicated on the bottom of this form. Pre-plan review meetings will always take place at the address indicated on the bottom of this form. This form may be obtained at our web-site: [www.co.washington.or.us](http://www.co.washington.or.us) or call 503-846-3470 for assistance.

<b>CUSTOMER INFORMATION:</b>			Date Submitted To Building Services: _____			
Name: _____			Representing: _____			
Phone: _____		Fax: _____		Cellular: _____		
E-Mail Address: _____			Project Name: _____			
Project Location: _____						
Project Description: _____						
<b>Project Number (if assigned)</b>		<b>Building Permit No. (if assigned)</b>			<b>LUT CASE FILE No. (if known)</b>	
P	0	0	5			

<b>FOR WASHINGTON COUNTY USE ONLY:</b> Project Location In Washington County? _____		Outstanding Permits? _____	
Sr. Plans Examiner Initials: _____		Date Request Received: _____	
		Date Assigned: _____	
Date Customer Phone Contact: _____		Message Left? _____	
PROJECT PLANS EXAMINER (PPX): _____		Phone: _____	
Fax: _____		E-Mail Address: _____	
Meeting Date: _____		Meeting Time: _____ AM / PM (circle one)	
		PSB Room Number: _____	
PPX Comments: _____			