

CITY OF HERMISTON
CIVIL DRAWINGS REVIEW FORM

Project Name: _____

Applicant Information

Name: _____

Address: _____

Phone #: _____

Engineer: _____

Firm & Phone #: _____

Site Information

Address: _____

Map/tax lot #: _____

Zoning designation: _____

Description of work: _____

By signing this form, you acknowledge that all applicable requirements and regulations set forth in the Hermiston Code of Ordinances and the Hermiston Public Works Design Standards and Specification Manual will be followed.

Applicant's signature: _____ Date: _____

**** Office Use Only ****

Date Filed: _____ Received By: _____ Fee (\$100) Date Paid: _____

Receipt #: _____

Meeting Date: _____