



Engineering Services Request

Full Name:

Is this a revision? ☐ Yes

☒ No

Design Request: ☒ Foundation

☐ Framing

☒ Lateral Bracing

☐ Other:

Subdivision:

Address:

City:

Lot:

Block:

Section/Phase:

Plan #:

Plan Name:

Elevation:

Garage Swing:

Garage Options:

Drop Garage: in.

Masonry Selection: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ None

Brick Return: ft.

REFERENCE 'PATIO TYPE' FOR COVERED PATIO

Covered Patio? ☐ Yes ☐ No

Patio Type:

Right Form Heights:

Right Rear Corner:

Right Front Corner:

Left Form Heights:

Left Rear Corner:

Left Front Corner:

Plan Options/Details:

MASTER BATH OPTION #1 / 5' STORAGE OPTION / BAY WINDOW AT MASTER / BOX OUT WINDOW AT DINING. NOTE - NO DROP NEEDED AT UTILITY OR MASTER SHOWER