

Meridian Metropolitan District

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SUBMITTAL REVIEW FORM

PROJECT NAME: _____ FILING/LOT #: _____ DEVELOPER: _____ RE: _____	DATE: _____ Delivery Via: <i>Hand Delivery</i> <i>Courier</i> <i>Mail</i> <i>Fed-X/UPS</i>
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ENGINEERING FIRM: _____ CONTACT: _____ PHONE: _____	ARCHITECT: _____ CONTACT: _____ PHONE: _____ LANDSCAPE ARCHITECT: _____ CONTACT: _____ PHONE: _____
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<input type="checkbox"/> Submittal Review	<input type="checkbox"/> Approval	<input type="checkbox"/> Final Review
<input type="checkbox"/> Redlines	<input type="checkbox"/> Referral from Agency	<input type="checkbox"/> Other: _____

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