



# CITY OF MENIFEE

## ENGINEERING DEPARTMENT

*FOR USE BY STAFF*

Permit#: \_\_\_\_\_

Received Date: \_\_\_\_\_

# LANDSCAPE PLAN CHECK APPLICATION

THIS FORM MUST BE SUBMITTED WITH FIRST PLAN CHECK

Project No: \_\_\_\_\_

Project Description: \_\_\_\_\_

**Name of Owner:** \_\_\_\_\_

Signature: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ FAX number: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_ Contact: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ FAX number: \_\_\_\_\_

\_\_\_\_\_ Email Address: \_\_\_\_\_

I, the undersigned engineer, do verify that all the items necessary for this project are attached.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address