

CCCCC					#	#
C		AA	SSSSS	EEEEEE	#####	
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PWD-93-76

DRAN _____

DRE _____

PLAN _____

INSP _____

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26 - Aug - 93

PWD 93 76

Letter of Transmittal

To BERNALILLO COUNTY Date 8-19-93
PUBLIC WORKS DEPT Job No. 757
HYDROLOGY

Attn: BOB FOGLESONG

Reference R10 BRAVO SENIOR CENTER

Gentlemen:

We transmit to you 2 copy(ies) of the following

- | | |
|---|--|
| <input type="checkbox"/> _____ Plats | <input type="checkbox"/> Shop Drawings |
| <input checked="" type="checkbox"/> <u>Grading + Drainage</u> Plans | <input type="checkbox"/> Submittals |
| <input type="checkbox"/> Specifications | <input type="checkbox"/> Material Specifications |
| <input type="checkbox"/> _____ Report | <input type="checkbox"/> Copy of Letter |
| <input checked="" type="checkbox"/> <u>Info Sheet</u> | |
| <input type="checkbox"/> _____ | |

This information is transmitted:

- | | |
|--|---|
| <input type="checkbox"/> As per your request | <input type="checkbox"/> For your files |
| <input checked="" type="checkbox"/> For your review & approval | <input type="checkbox"/> For your use |
| <input type="checkbox"/> For your information | <input type="checkbox"/> Please review & return |
| <input type="checkbox"/> For your attention | <input type="checkbox"/> For return to your files |
| <input type="checkbox"/> For your signature | <input checked="" type="checkbox"/> Please advise |
| <input type="checkbox"/> _____ | |
| <input type="checkbox"/> _____ | |

Remarks: *[Signature]*

By: *[Signature]* Copies To Cherry See Architects (original)

COUNTY OF BERNALILLO
APPLICATION FOR CASE REVIEW

TYPE OR PRINT IN INK ONLY.

Please complete the following application for review of your case. Submit four blueines of plat, drawings, or information. Submit a County Zone Atlas Map with subject property marked on the map. If a grading and drainage plan is not included with a land division, subdivision, replat, conceptual, or excavation permit submittal, please submit one 8.5" x 11" photocopy of a USGS quad map with the subject property superimposed. Incomplete or inaccurate applications may delay the review. DO NOT USE THIS FORM FOR RESUBMITTALS FOR WHICH PUBLIC WORKS HAS ALREADY OR IS IN THE PROCESS OF PROVIDING COMMENTS ON. PLEASE INFORM THE RECEPTIONIST OF A RESUBMITTAL IN ORDER THAT YOU FILL OUT THE "RESUBMITTAL FOR CASE REVIEW" FORM. IF THE CASE HAS AN EXISTING CASE NUMBER, THE SUBMITTAL IS CONSIDERED A RESUBMITTAL.

1. APPLICANT INFORMATION:

a. APPLICANT IS (CHECK ONE):

Owner

Contractor

Surveyor

Agent

Architect/Engineer

☒

Drainage Engineer

b. Date of this application: 8-19-93

c. SIGNATURE OF APPLICANT:

(PRINT): SCOTT M MCGEE

(SIGN):

Scott M McGee

d. OWNER BERNALILLO COUNTY

PHONE 768-2000

ADDRESS

ZIP CODE

e. AGENT NA

PHONE

ADDRESS

ZIP CODE

f. CONTRACTOR UNKNOWN

PHONE

ADDRESS

ZIP CODE

g. ARCHITECT/ENGINEER CHERRY SEE

PHONE 842-1278

ADDRESS 220 A GOLD SW

ZIP CODE 87102

h. SURVEYOR ALDRICH LAND SURVEYING

PHONE 884-1990

ADDRESS P.O. Box 30701

ZIP CODE 87190

i. DRAINAGE ENGINEER ISAACSON & ARFMAN

PHONE 268-8828

ADDRESS 128 MONROE NE

ZIP CODE 87108

2. TYPE OF REVIEW (CHECK ONE):

Replat

Excavation Permit

Other (Specify):

Minor Subdivision

Construction Drawing

(Land Division)

Conceptual

Subdivision

→ Grading/Drainage

Building Permit

Preliminary

3. LOCATION OF REQUEST:

- a. Site Address: 3906 ISLETA BLVD SW
- b. Legal Description: TRACT B-1, HARRISON SCHOOL
- c. County Zone Map No.: P-12

4. If this case has or is being reviewed by another agency, please write case number(s): _____

CASE NO.:

Public Works Intended Use Only

REP _____
LDR _____
SUB _____
BPP _____

PER _____
CON _____
PWD _____
GDR _____