TRANSMITTAL OF PLANS AND/OR SPECIFICATIONS to:

AL Dept. of Finance, Real Property Mgt., Div. of Construction Mgt. (DCM) 770 Washington Avenue, Suite 444, Montgomery, AL 36104 • P.O. Box 301150, Montgomery, AL 36130 334-242-4082 (ph) planreview@realproperty.alabama.gov

):	DCM Form B-1 Revised June 2023
Department Use (Invoice #	Dnly

Date Paid

DCM (BC) #:	DCM # is assigned upon rece contain the DCM # after it is a			
Firm Name of project's				
lead design professional (LDP): _		<u> </u>	Date:	
Owner Entity Name and Address:		Architect Firm Name a	and Address:	
Phone #: Email:		Phone #:	Email:	
Structural Engineer Firm Name and Add	ress:		Firm Name and Address:	
Phone #: Email:		Phone #:	Email:	
Electrical Engineer Firm Name and Add	iess:	Other Consultant Nam	ne and Address:	
Phone #: Email:		Phone #:	Email:	
			ecific school in a project [must match funding s	copo]).
	ect's submittal is located: Local PSCA	(# required when) I PSCA checked) I nents available on dcm , Sprin	a project with bid pkgs/phases? Yes Private Other	No.
BID DATE: (Month/Day/Yea "Approved" Final Review of plans and spe on any "Conditionally Approved" and "Not - Finance Administrative Code 355-13-1	r) cifications must be obtained prior t Approved" Plan Review Project Co 33 and DCM Manual of Procedure	o receipt of bids for work omments Letters must be s Chapter 3.B.1.	be determined within DCM's jurisdiction. The required actions accomplished until an "Approved" review is ob	s noted tained.
DOCUMENTS			Optional 65% Intermedia	te
SUBMITTED: Schema	atic Preliminary Fina	al 1st Revised Fir	65% Intermediate PR Fee required	
Calculate and pay fees at		c Plan Review Fee required		
Addenda and ASI's are included	Theview Tee Tequiled Dasic	i nan neview ree required	Additional (2 nd /3 rd /4 th) Rev. F Additional Revised Final PR Fee require	
in the Basic Plan Review Fee. • Rebids, Revised Scopes and				
VE Items may incur a PR Fee.			ADA Review ADA Plan Review Fee required	>
	ubmittal types; send pdfs of one -Yr Public University project for c epair, or maintenance of a roof, wit	submittal per email to p apital improvement or all h both an estimated cost	Des & VL Ilems.	d/to be
ARCHITECT & ENGINEER				
signatures of all engineeri All architectural drawings,	ng disciplines must appea addenda, ASIs, ASDs, ac addenda, ASIs, ASDs, ad	ar in the project ma ditional specification	al's seal. The seals, dates, and nual. ons, etc., must bear the architect's ns, etc., must bear the seals, dates	seal. s,
SUBMITTED BY:				
Ar	chitect / Engineer printed name		Architect / Engineer signature	
PROJECT COMMENT LET	TER (include A/E & Own	er email addresses	as required for DCM's PCL distribut	tion) :
Architect / Engineer	email address	Owner	email address	