

**RECORD SET HANDLING****FOR DSA USE ONLY**

File No. \_\_\_\_\_ - \_\_\_\_\_

Application # \_\_\_\_\_ - \_\_\_\_\_

Project Name \_\_\_\_\_

Please return the original plans and specifications as instructed below (client must check appropriate box below):

DSA stamped plans and specifications	
Check all that apply: <input type="checkbox"/> Plans <input type="checkbox"/> Specs	
Total number of drawings _____	
Stamped date _____	
Submittal	
<input type="text"/>	Increment Description (e.g. CO#, Add#)
Call for pickup _____	

 I will have my representative pick up the original documents.

Call me \_\_\_\_\_ at (\_\_\_\_) \_\_\_\_\_ for pickup.

 Please package and ship original documents via the delivery services indicated: My account number: \_\_\_\_\_ Method of Delivery:   
(e.g. ground, next day, etc.)Insurance Requested: Yes No Declared Value: \_\_\_\_\_  
(Enter -0- if no insurance is requested)

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I understand the risk inherent in shipping documents using the delivery method indicated above and agree to hold the State harmless for any loss or damage to the original plans and specifications that may be incurred. I agree to pay the shipping cost.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ (PRINT NAME) Email: \_\_\_\_\_

**Ship to** Attention: \_\_\_\_\_

Company: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Pickup Verification:**

I picked up the original documents for the referenced project:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_