Preliminary Review Submittal

Tenant Name

Facility & Location

Project

TAA Number

Check one	Refer to Checklist:
☐ Conceptual	TAA CK 04
☐ Architectural	TAA CK 05
☐ Sustainable Design	TAA CK 06

Project A/EOR

Firm Name

Name, Title

Address

City, ST Zip

Phone Email

License State ☐ NY ☐ NJ No. Type ☐ PE ☐ RA

Comments

We enclose our Preliminary Review Submittal in the format required by Section 1.7 and Section 4.1.2.3 of the TCAP Manual. If there are any additional attachments, please detail here.

Quantity	Description	Revision No.	Dated	By
☐	Electronic copy of the above			

Submitted By

Name, Title

Signature

Date

Copies To

To be submitted under cover letter from A/EOR.