Georgia Institute of Technology - Facilities Administration

SCHEMATIC DESIGN DRAWING REVIEW FORM

Date: _____   Re: _____

Project Name: _____   GIT Contract No.: _____

Project Phase.: _____   Reviewed By: _____

**Project Information
(on cover sheet and drawing title block)**

☐ Landscape Architect Address/Contact Person (with phone and email.)   ☐ Georgia Tech Contact Name/Address/Contact Person (with phone and email.)

☐ Date   ☐ Project Name   ☐ Project Number

☐ Project Location Address   ☐ Drawing List   ☐ Key Map

☐ Other

Drawing Review Checklist:

Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Drawing No. _____ Drawing Title: _____ Date: _____
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Drawing No. _____ Drawing Title: _____ Date: _____
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Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Form Version: MARCH 2013

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Georgia Institute of Technology - Facilities Administration

Drawing No. _____ Drawing Title: _____ Date: _____
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Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Drawing No. _____ Drawing Title: _____ Date: _____
Comment: _____

Please use additional pages
as necessary.

Submittals:
☐ Date Received and including:_____

    ☐ Drawing Set complete_____
    ☐ Samples_____

☐ Date Submitted to GIT_____
☐ Date Returned to Landscape Architect _____
☐ Action Taken_____

Form Version: MARCH 2013

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