

COUNTY OF RIVERSIDE DEPARTMENT OF BUILDING AND SAFETY

PERMIT APPLICATION

Permit Description-			Date		Permit	#		
Jobsite Address					ıU	nit/Ste/S	pace #	
City	State Zip Code CA			Ass	Assessor's Parcel Number			
Property Owner's Name Last, First Name				Lot	on Sept	tic? YES	NO	
Mailing Address	City			·	State		Zip Code	
Phone Number ()			Email					
Note: As the applicant you will be financially responsible for <u>ALL</u> supplemental billings, fees and refunds for any and all permits per Ordinance 457. Any changes in applicant information must be made in writing by the original applicant to the Building Department. (ref. form 284-092)								
Financial Applicant Name								
Mailing Address	City					State	Zip Code	
Phone Number ()			Email					
Authorized Agent Name (Form 284	-308 Required)							
Mailing Address			City		State		Zip Code	
Phone Number ()			Email					
Architect/ Engineer/ Project Mana	ager				License	#		
Mailing Address		City			State	:	Zip Code	
Phone Number ()			Email					
Contractor			License#		Class			
Mailing Address		City		'	State	Z	Zip Code	
Phone Number ()			Email					

By my signature below I certify the following: I represent the contractor of record. In permit types where virtual inspection is required, the contractor shall be available at the jobsite during inspections.

Signature______ Print______ Date_____

I, the applicant/owner of the property located as noted as project address, acknowledge that I am aware approval from the Planning Department, Fire Department, Environmental Health Department, and any other agencies indicated on the department clearances are required prior to the issuance of the building/grading permit. I hereby choose to submit plans for building/grading plan check prior to obtaining the necessary department clearances. Furthermore, I am aware that if the building/grading plans have been reviewed and I cannot obtain the necessary approvals from the other agencies, the charges from Building and Safety Department for review of plans are not refundable. I understand that additional plan check fees may apply if the plans submitted are modified in order to obtain approvals from other agencies.

Telephone: 951-955-1800 • Fax: 951-955-1806