



Sam Shahrouri
Deputy Director of TLMA
Building Official

County of Riverside Building and Safety Department Residential Tract Worksheet

*Indicates Required Fields

*Tract # _____ *Project Name _____ *Check One: Model Production

Email: BuildingSubdivision@rivco.org

*Developer/Applicant:		*Applicant Mailing Address:			*Bldg. Code Yr:	*Date:
*Agent:		*Email:	*Phone:		*Entry Monument PP#:	
			Fax:		Phase #:	
*Agent's Supervisor's Name:			*Rough BGR:		*FSD PP#:	
*Agent's Supervisor's Email:			*Precise BGR:		*MHC PP#:	

*Lot	*Plan Type	*Elevation	*BSD#	*Address	*APN	*Square Footage				*Setbacks				Selected Option	Option Additional Sq. Ft.	Permit BRS
						Dwelling	Garage	Porch	Patio	Front	Left	Right	Rear			
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Applicant Acknowledges that BRS Permits generated by this form shall be issued simultaneously: * _____ (Initials)

OFFICE USE ONLY	
80 Series COA:	Notes:
OASUB:	
Project #:	