



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# (Production Only):								
						*Fax:		*Phase #:								
*Agent's Supervisor Name:						*Rough BGR:		*FSD PP#:								
*Agent's Supervisor Email:						*Precise BGR:		*MHC PP#:								
*Lot	*Plan Type	*Elevation	*BSD#	*Address	*APN	*Square Footage				*Setbacks				*Selected Options	*Options Additional Sq. ft.	Permit BRS
						Dwelling	Garage	Patio	Porch	Front	Left	Right	Rear			
																BRS
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Applicant acknowledges that BRS Permits generated by this form shall be issued simultaneously * _____ (Initials)

*Would you like Mitigation Fees generated at the time of BRS number processing? Yes No **NOTE: MT numbers shall be voided if unpaid at time of mitigation fee increase.**

OFFICE USE ONLY

80 Series COAs:	Notes:
Concurrent Processing: Yes or No	
Concurrent Processing Form Recieved: Yes or No	
Project # / Set ID:	