



County of Riverside Building and Safety Department Tract Standard Plan Worksheet

* Indicates Required Fields

Sam Shahrouri
Deputy Director of TLMA
Building Official

*Tract# _____ *Project Name _____

Email: BuildingSubdivision@rivco.org

*Developer/Applicant:					*Applicant Mailing Address:					*Bldg. Code Yr:		*Date:	
*Agent:					*Email:			* Phone:					
								Fax:					
*Agent's Supervisor Name:					* Digital: <input type="checkbox"/> Yes <input type="checkbox"/> No			*Solar Yes/No:			*FSD PP#:		
*Agent's Supervisor Email:					*Solar Plans Included Yes/No:					Solar Standard:		Solar Optional:	
OFFICE USE ONLY													
*Plan Type	*Elevation	*Square Footage			*Options 1		*Options 2		*Options 3		*Options 4		Permit Number
		Dwelling	Garage	Patio/ Porch	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	
													BSD
													BSD
													BSD
													BSD
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OFFICE USE ONLY													
Date received:		Staff:		Notes:									
Date Processed:		Staff:		Notes:									
Date fees paid:		Staff:		Notes:									
Date plans approved:		Staff:		Notes:									
Revisions received:		Staff:		Notes:									



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Additional Options

*Tract# _____

Plan Type	Elevation	Options 5		Options 6		Options 7		Options 8		Options 9		Options 10		Options 11	
		Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft	Area	Sq. Ft

OFFICE USE ONLY		
Date received:	Staff:	Notes:
Date Processed:	Staff:	Notes:
Date fees paid:	Staff:	Notes:
Date plans approved:	Staff:	Notes:
Revisions received:	Staff:	Notes: