



CITY OF PERRIS
DEVELOPMENT SERVICES DEPARTMENT
BUILDING AND SAFETY DIVISION
135 N. "D" Street, Perris, CA 92570-2200
TEL: (951) 443-1029 FAX: (951) 943-3293

Request for Report of a Residential Building Permit Record

Property Address: _____
Assessor's Parcel Number (if known): _____
Owner of Property: _____ Telephone Number: _____
Applicant Name: _____ Telephone Number: _____
(If other than owner)
Address: _____

Completed report should be (please select one of the following):

- Picked-up at the Permit Center (Telephone Number): _____
- Faxed to (Fax Number): _____
- Mailed to (Address): _____
(Name) (Address)

Important Information for Applicant

A Report of a Residential Building Permit Record might be required to be delivered to the buyer prior to the conclusion of a sale or transfer of a residential building.

It is the responsibility of the seller to ensure that the dwelling is equipped with a chimney spark arrestor and smoke detectors at the time of sale.

Smoke detectors shall be mounted on the ceiling or wall (per smoke detector installation requirements) in the sleeping rooms, and on the ceiling or wall at a point centrally located in the corridor or area giving access to the rooms used for sleeping purposes. Where sleeping rooms are on an upper level, the smoke detector shall be placed at the center of the ceiling directly above the stairway. Smoke detectors may be battery operated when installed in existing buildings.

I have read the above information: _____
Signature of Applicant Date

Application fee of \$__ is due at time of request (we do not bill escrow) Received by: _____ Dated Rec'd: _____

CREDIT CARD PAYMENT OPTION

VISA MC Card # _____ Expiration Date: _____
Name as it appears on card: _____ V-Code #: _____
(Last 3 Numbers on Back of Card)
Billing Address: _____
Signature: _____ Date: _____
(Authorizes credit card payment of fees)