



COUNTY OF RIVERSIDE  
BUILDING AND SAFETY DEPARTMENT  
Tenant Disclosure Form

**PERMIT No.** \_\_\_\_\_

Property Address \_\_\_\_\_  
Street Name/Number      Area/Community      zip code

Business name: \_\_\_\_\_

Suite name: \_\_\_\_\_

Occupancy group: \_\_\_\_\_

Square footage: \_\_\_\_\_

Type of construction: \_\_\_\_\_

Is the building equipped with fire sprinklers \_\_\_\_\_

Number of Employees: \_\_\_\_\_

Number and location of restroom facilities: \_\_\_\_\_

List any chemicals used or stored and quantities: \_\_\_\_\_

Are you making any improvements to the suite or building other than painting, papering, floor covering, movable cases, counters or partitions not over 5 feet 9 inches high? \_\_\_\_\_

Are you a new tenant? \_\_\_\_\_

Are you the first tenant? \_\_\_\_\_

**Plans Required:**

- ◆ If you are not doing any work that requires a permit, please provide four copies of a plot plan and a floor plan.
- ◆ If you are making other improvements, please see the Tenant Improvement Plan Requirements handout.

\_\_\_\_\_  
Signature                                      Print Name                                      Date

Circle One: Tenant / Owner / Contractor / Architect / Engineer