

City of Riverside

Building & Safety Division

Phone: (951) 826-5697

www.riversideca.gov



❖ SPECIAL INSPECTOR FAX OR MAIL-IN RENEWAL APPLICATION ❖

MAIL TO: City of Riverside
3900 Main Street
Riverside, CA 92522
ATTN: Building & Safety

OR FAX TO: (951) 826-5622
ATTN: Special Inspector Renewals
(Note: if the FAX option is used, you must also include the Credit Card Authorization form)

(This application is only intended for previously Licensed City of Riverside Special Inspectors)

Current City of Riverside Special Inspector License Number:

SP -

License Categories: (check only those that are applicable)

- | | |
|-------------------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Structural Steel and Welding | <input type="checkbox"/> Masonry |
| <input type="checkbox"/> Post – Tension and Pre-stressed Concrete | <input type="checkbox"/> Reinforced Concrete |
| <input type="checkbox"/> Concrete (testing only) | <input type="checkbox"/> Fire Proofing |
| <input type="checkbox"/> Other (Specify) _____ | |

Fee Amount is based on the total number of License Categories chosen:

- One (1) License Category = \$63
Two (2) License Categories = \$78
Three (3) License Categories = \$93
Four (4) License Categories = \$108
Five (5) License Categories = \$123
Six (6) License Categories = \$138

\$ Total Fee:

\$.

Name

Mailing Address

City

State

ZIP Code

Telephone Number

Date

IMPORTANT NOTE: Please include copies of your CURRENT I.C.C. WALLET CARD Certifications and/or current City or County of L.A. Special Inspector Certification Card. Include a check, money order or Credit Card Authorization form if using the Mail-in renewal option or a Credit Card Authorization form if using the FAX renewal option.

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❖ CREDIT CARD AUTHORIZATION ❖

(Use this form to authorize credit card payment for FAX or Mail-in Special Inspector Renewals)

For permits indicated on the attached forms, please charge fees to (please check one)				
<input type="checkbox"/> Visa Express	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Discover	<input type="checkbox"/> American	
Credit Card Number (Confidential)				
□□□□ - □□□□ - □□□□ - □□□□				
Credit Card Expiration Date		\$ Fee Amount (see <i>Renewal Application</i>)		
□□ - □□		\$□□□□.□□		
Name				
Mailing Address				
City	State	ZIP Code	Telephone Number	FAX Number
Authorized Card Holder Signature				Date

INSTRUCTIONS FOR FAX (or Mail-in) SPECIAL INSPECTOR RENEWALS

1. FAX (or mail-in) the following 3 completed forms to (951) 826-5622:
 - a. This **Credit Card Authorization Form** (*Mail-in renewal applications may also use a check for payment in lieu of this credit card authorization form.*)
 - b. The **FAX (or Mail-in) Special Inspector Renewal Application**
2. We will process your FAX (or mail-in) renewal applications during working hours as they are received, usually within 24 hours.
3. We will FAX you a copy of the renewal receipt (if a FAX number is given) and mail you the original receipt for payment.