DUPLICATION OF BUILDING PLANS AUTHORIZATION FORM

Pursuant to Health and Safety Code Section 19851, the original or current owner of the subject building (or if a common interest development, the Board of Directors or similar governing body established to manage the building) and certified, licensed or registered professional or his or her successor who signed the original document must authorize the duplication of issued building permit construction plans maintained by the Community & Economic Development Department, Building & Safety Division.

PLAN	DUPLICATION REQUEST FOR ADDRESS:		
I DEC	LARE THAT I AM: (CHECK ONE)		
	OWNER - The original or current owner of the property described above; or		
	ARCHITECT/ENGINEER - The certified, licensed or registered Professional of Record or his/her successor who signed the original plans/documents for the above described property; or		
	OWNER'S REPRESENTATIVE - The authorized representative of the Board of Directors or other governing body of the association established to manage the above described building, and have the authority to sign on behalf of the governing body.		
AUTH	ORIZATION OR REFUSAL		
	I,hereby authorize the City of Riverside to duplicate or permit the duplication of the official copy of plans for the above mentioned building or structure pursuant to the plan duplication request. Further, a facsimile of my signature may be used for the limited purpose set forth herein.		
	I,hereby refuse authorization for the City of Riverside to duplicate the building plans described above pursuant to the plan duplication request. Further, a facsimile of my signature may be used for the limited purpose set forth herein.		
SIGN	ATURE OF PROFESSIONAL:		
DATE:			
Pleas	e mail within ten (10) days of receipt to:		
Name:		-	
Addres	ss:	_ Professional Seal	
City:	State: Zip:		