

Application for Report of Residential Building Record

Property Address:	- p	- 100010
Assessor's Parcel Number (if known):		
	Telephone Numb	er:
Applicant Name:	Telephone Numb	
Address: (if other t	han owner)	
Completed report should be (ple	ase complete one of the following):	
• Picked-up at the Permit Center (Tele	phone Number):	
Faxed to (Fax Number):		
NA-1-14- /A / /		
Fmail (Address):		
Important Information for Applicant		
A Report of Residential Building Records is required to be delivered to the buyer prior to the conclusion of a sale or transfer of a residential building (Ordinance No. 715).		
It is the responsibility of the seller to ensudetectors at the time of sale (Ordinance No.	ure that the dwelling is equipped with a chimney 1388).	spark arrestor and smoke
rooms, and on the ceiling or wall at a point sleeping purposes. Where sleeping rooms	ceiling or wall (per smoke detector installation req t centrally located in the corridor or area giving acc are on an upper level, the smoke detector shall be letectors may be battery operated when installed in e	cess to the rooms used for placed at the center of the
I have read the above info	rmation:	
	Signature of Applicant	Date
Application fee of \$90 is due at time of appli	ication (we do not bill escrow) Received by:	_ Dated Rec'd:
CREDIT CARD PAYMENT OPTION	□ VISA □ MC □ AE □ Discover	
Card #	Expiration Date:	
Name as it appears on card:	(Visa & MC: Last 3 Numbers on Back of Card; AE: 4 n	V-Code #:
Billing Address:		umbers on top right front of card)
Signature:		Date:
(Authorizes cl	redit card payment of fees)	

Updated 11/13/17

City Hall Community Development Department
Permit Center 1052 South Livermore Avenue

Livermore, CA 94550

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