

## **CITY OF BELVEDERE**

## AFFIDAVIT OF RECEIPT OF BUILDING RECORDS REPORT (Municipal Code Section 16.24.050)

This is to certify that I*,	is to certify that I*, am the buyer (tran		
Please	Print		
of the property located atAddress	, and	, and that I have received a	
copy of the Residential Building Records Report No	No concerning the above property.		
☐ I have received the handout: "Permitted Uses in	the Single Family D	istricts" (please check ✓ if yes).	
Signature		Date	
My mailing address for this property will be (if other than address above):	Phone numb	er for this property:	
Street Name & Number	_()_		
City, State & Zip			
* Please list additional owners below:			
Print Name	Sign	Date	
Print Name	Sign	Date	
Print Name	Sign	Date	

PLEASE RETURN TO: City of Belvedere

450 San Rafael Ave

Belvedere CA 94920