

# (COUNTY OF RIVERSIDE TRANSPORTATION AND PLANNING DEPARTMENT STANDARD TITLE BLOCK REQUIREMENTS FOR LANDSCAPE PLANS)

PLAN CHECK OVERSIGHT LLA / CID	REGISTRATION NUMBER	DATE SIGNED	TENTATIVE APP. PP#
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APPROVED AS TO CONFORMANCE WITH APPLICABLE COUNTY STANDARDS AND PRACTICES (PLANNING DEPARTMENT ONLY - ON-SITE).

ORD. 869 VERSION
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DATE SIGNED
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REGISTRATION NUMBER
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PLAN CHECK OVERSIGHT ENGINEER
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APPROVED AS TO CONFORMANCE WITH APPLICABLE COUNTY STANDARDS AND PRACTICES (TRANSPORTATION DEPARTMENT ONLY - ROW/OFFSITE).

SEE "WATER / MAINTENANCE DISTRICT APPROVAL SIGNATURE BLOCKS" DOCUMENT FOR EXAMPLES.

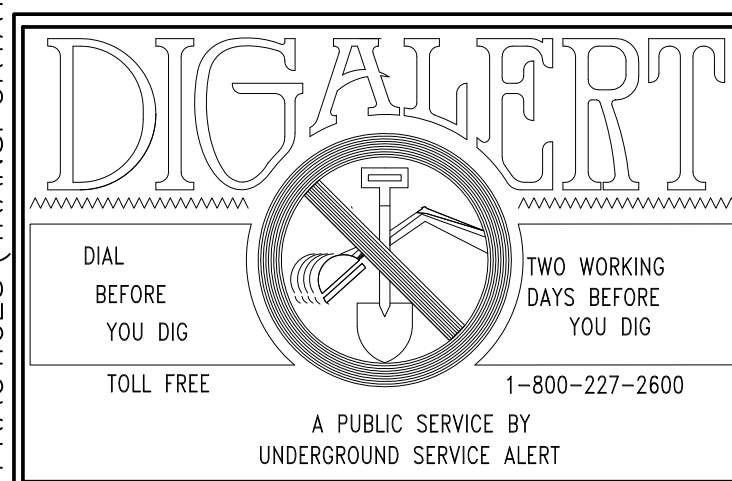
ENTER RELEVANT INFORMATION

**THIS NOTE SHALL BE DELETED IF PLANS SHOW WORK IN R.O.W. ONLY OR IF L&LMD NO. 89-1C MAINTAINED**

INSERT APPROPRIATE WATER DISTRICT APPROVAL SIGNATURE BLOCK (IF RECYCLED WATER IRRIGATION)

INSERT APPROPRIATE MAINTENANCE DISTRICT APPROVAL SIGNATURE BLOCK (NOT REQUIRED IF INDIVIDUAL INDUSTRIAL/COMMERCIAL MAINTAINED)

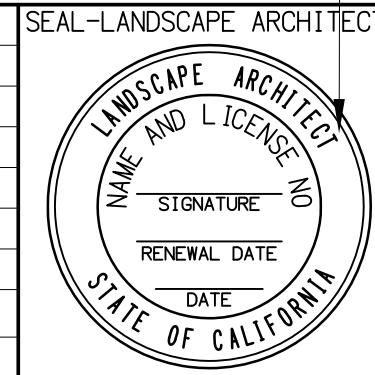
NOTE: APPROVAL BY THE TRANSPORTATION DEPARTMENT IS FOR WORK WITHIN THE ROAD RIGHT-OF-WAY ONLY.



**NOTE:**  
WORK CONTAINED WITHIN THESE PLANS SHALL NOT COMMENCE UNTIL AN ENCROACHMENT PERMIT AND/OR A GRADING PERMIT HAS BEEN ISSUED.

The private landscape architect signing these plans is responsible for assuring the accuracy and acceptability of the design herein. In the event of discrepancies arising after county approval or during construction, the private landscape architect shall be responsible for determining an acceptable solution and revising the plans for approval by the county.

MARK	BY	DATE	REVISIONS	APPR.	DATE	COUNTY



PREPARED BY: \_\_\_\_\_  
 NAME OF LANDSCAPE ARCHITECTURE CO. \_\_\_\_\_  
 ADDRESS LINE 1 \_\_\_\_\_  
 ADDRESS LINE 2 \_\_\_\_\_  
 PHONE # / FAX # \_\_\_\_\_  
 CERT NO. XXXX, EXP XX/200X DATE: \_\_\_\_\_

BENCHMARK: \_\_\_\_\_  
 SCALE: H: \_\_\_\_\_ V: \_\_\_\_\_

TRACT, PM, CU, PP, PU, or MS I.P. No. OXXXX  
 COUNTY OF RIVERSIDE  
 PROJECT NAME  
 STREET NAME(S)  
 LANDSCAPE PLANS  
 ENTER SHEET NAME (I.E.: PLANTING PLAN)

SHEET NO. XX  
 OF \_\_\_ SHTS

FOR: OWNER'S NAME \_\_\_\_\_ W.O. \_\_\_\_\_ COUNTY FILE NO. \_\_\_\_\_