

APPLICATION # _____ - _____ - _____

A.P.N.# _____ - _____ - _____

Type of Permit: Commercial Residential

Bldg Elec Mech Plumb Fire _____

BUILDING DEPT INFORMATION

Date Application Submitted: ____ / ____ / ____

Required Department Approvals

	<u>By</u>	<u>Date</u>		<u>By</u>	<u>Date</u>
<input type="checkbox"/> Bldg	_____	_____	<input type="checkbox"/> Air Qual	_____	_____
<input type="checkbox"/> Planning	_____	_____	<input type="checkbox"/> OES/Health	_____	_____
<input type="checkbox"/> Eng	_____	_____	<input type="checkbox"/> Recycle	_____	_____
<input type="checkbox"/> Fire	_____	_____	<input type="checkbox"/> Tree Prog	_____	_____
<input type="checkbox"/> Facilities	_____	_____	<input type="checkbox"/> Other	_____	_____

Summary of Fees Collected

Type of fee	Date
Plan Check \$ _____	_____
Inspection \$ _____	_____
Engineering \$ _____	_____
Fire PI Ck \$ _____	_____
Planning \$ _____	_____
\$ _____	_____

Employee Initials _____

OWNER INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Phone: (____) _____

ARCHITECT/ENGINEER INFORMATION

Name, Firm: _____

Address: _____

City/State/Zip: _____

Phone: (____) _____

CONTRACTOR INFORMATION

Name, Firm: _____

Address: _____

City/State/Zip: _____

Phone: (____) _____

CONTRACTOR LICENSE / WORKERS COMP

Ca Lic. No: _____ Class: _____

Exp. Date: _____

Workers Comp Carrier: _____

Policy No.: _____ Exp. Date: _____



CITY OF WEST SACRAMENTO
 1110 West Capitol Avenue
 West Sacramento, CA 95691
 Office (916) 617-4683
 Fax (916) 371-0845
 24-Hr Inspection Line (916) 617-4691

BUILDING PERMIT APPLICATION

Other than the gray sections, all information must be complete including the declarations on the reverse side.

BUILDING PROJECT INFORMATION

Project Address: _____

Tenant/Business Name: _____

Project Description: _____

New Addition Alter Repair Demolish Invest

SQ. FT: _____ Occupancy Group: _____

SQ. FT: _____ Occupancy Group: _____

Type of Const: _____ No. of Stories: _____

First Floor Sq. Footage: _____ (Excluding Garage)

Construction Valuation: \$ _____

CODE YRS:

CBC _____ CEC _____ CPC _____ CMC _____ CFC _____

Subdivision: _____ Lot No. _____

HAZMAT
 YES NO

Indicate if the intended occupancy will use chemicals. Initialing "yes" acknowledges that H&S Code Sections 25505, 25533 and 25534 as well as filing directions were made.

APPLICANT INFORMATION

Name: _____

Address: _____

City/State/Zip: _____

Phone: (____) _____

Fax: (____) _____

E-Mail: _____

Contact Person: _____

Phone: (____) _____

Email: _____

APPLICANT: I certify that I have read this application and state that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes. I (We) agree to save, indemnify and keep harmless the City of West Sacramento against liabilities, judgments, costs and expenses which may accrue against said City in consequence of the granting of this permit.

Owner Contractor Authorized Agent

Signature of Applicant

Date

OWNER BUILDER DECLARATION

7031.5. I hereby affirm that I am exempt from the Contractor's License Law for the following reasons.

Each county or city which requires the issuance of a permit as a condition precedent to the construction, alteration, improvement, demolition or repair of any building or structure shall also require that each applicant for such a permit file as a condition precedent to the issuance of a permit a statement which he has prepared and signed stating that the applicant is licensed under the provisions of this chapter, giving the number of the license and stating that it is in full force and effect, or if the applicant is exempt from the provisions of this chapter, the basis for the alleged exemption.

Any violation of this section by any applicant for a permit shall be subject to a civil penalty of not more than five hundred dollars (\$500).

_____, I, as owner of the property or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale. Section 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of a property who builds or improves thereon, and who does such work himself/herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner will have the burden of proving he/she did not build or improve for the purpose of sale.

_____, I, as owner of the property, am exclusively contracting with Licensed contractors: The Contractor's License Law does not apply to an owner of property who builds improves thereon, and who contracts for such projects with a contractor(s) license pursuant to the Contractor's License Law. I am aware that proof of their Worker's compensation should be provided to me.

_____ I am exempt under Section _____ P. & P.C. for this reason _____

I hereby certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

Owner's Signature _____ Date _____

Print Name _____

CONTRACTOR INFORMATION

LICENSED CONTRACTOR DECLARATION: I hereby affirm that I am licensed under provisions of Chapter 9, commencing with Section 7000, of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number and Class. _____ Exp. Date _____

Signature _____ Date _____

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations.

_____ I have, will maintain and provide a copy of the certificate of consent to self-insure for workers compensation as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

_____ I have and will maintain workman's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My Worker's compensation insurance carrier, expiration date, and policy number are:
Carrier _____ Policy # _____ Exp. Date _____

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

_____ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forth with comply with those provisions.

Applicant _____ Date _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES PER INFRACTIONS PER SECTION 3702.9 (a)(b)(c). IN ADDITION TO THE COST OF COMPENSATION DAMAGES AS PROVIDED FOR IN SECTION 3700.1 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEES.

NOTE: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued