



# Building Permit Application

Permit: # \_\_\_\_\_

### FOR OFFICE USE ONLY

Plan Check Total: \$ \_\_\_\_\_ Receipt: # \_\_\_\_\_  
Permit Fee: \$ \_\_\_\_\_ SMIP: \$ \_\_\_\_\_  
SB1473: \$ \_\_\_\_\_  
Permit Total: \$ \_\_\_\_\_ Receipt: # \_\_\_\_\_

### PROJECT INFORMATION

Number & Street Name: \_\_\_\_\_ APN: # \_\_\_\_\_  
Lot: # \_\_\_\_\_ Block: # \_\_\_\_\_ Track: \_\_\_\_\_

Job Valuation: \$ \_\_\_\_\_

Job Description: \_\_\_\_\_  
\_\_\_\_\_

### OWNER INFORMATION

Owner Name: \_\_\_\_\_ Telephone Number: # \_\_\_\_\_  
Email: \_\_\_\_\_  
Number & Street Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### CONTRACTOR INFORMATION

Business Name: \_\_\_\_\_  
Telephone Number: # \_\_\_\_\_ Email: \_\_\_\_\_  
Number & Street Name: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

#### Licensed Contractors Declaration

Thereby 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.

State License: # \_\_\_\_\_ License Class: \_\_\_\_\_ Del Rey Oaks License: # \_\_\_\_\_  
Worker's Comp Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

This permit must be available to a City of Del Rey Oaks representative for inspection at all times. It will expire and become void if: work is not stated within 180 days from the date of issuance, work is abandoned for more than 180 days, or an inspection is not performed with 180 days from the last inspection.

Do not cover or conceal any construction until the work is inspected, the inspection is recorded on the job card and noted in the office. All inspection requests are required to be made a minimum of 24 hours in advance.

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Issued By: \_\_\_\_\_ Date: \_\_\_\_\_ Permit Number: \_\_\_\_\_

APPROVALS: ARC: \_\_\_\_\_ HEALTH: \_\_\_\_\_ MRWMD: \_\_\_\_\_  
MRWPCA: \_\_\_\_\_ MPUSD: \_\_\_\_\_

Plan Check Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**OWNER/BUILDER DECLARATION**

I hereby affirm that:

**I am exempt from the Contractor's License Law** for the following reason (Section 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he/she is licensed pursuant to the provisions of the Contractor's License Law [Chapter 9 (commencing with 7000) of Division 3 of the Business and Professions Code] or that he/she is exempt there from and the basis for the alleged exemption. Any violation of section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500):

**I am 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 property who builds or improves such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale).

**I, as owner of the property, am exclusively contracting with licensed contractors** to construct the project (Section 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).

I am exempt for this reason: \_\_\_\_\_

**Owner's Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**WORKER'S COMPENSATION DECLARATION**

I hereby affirm under penalty of perjury one of the following declarations:

**I have and will maintain a 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 issued.

**I have and will maintain workers' compensation insurance,** as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

**Worker's Comp Carrier:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

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

**Applicant's Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEE**

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

**Applicant's Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner**  **Contractor** OR **Agent for:**  **Owner**  **Contractor**

State Regulations require that all construction debris be disposed of properly. This means that we are now required to get copies of your receipts from dumping of all debris PRIOR TO YOUR FINAL INSPECTION. By Signing you agree to provide copies of all dump receipts to the City Clerk prior to project final.

**Owner/Builder or Contractor Signature:** X \_\_\_\_\_ **Date:** \_\_\_\_\_