

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or certificate of Workers' Compensation Insurance or a certified copy thereof (Sec. 3800, Lab C).

Policy No. _____ Company _____

- Certified Copy is hereby furnished.
 Certified Copy is filed with the city building inspection department.

Exp. _____
 Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(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 Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT. If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTOR DECLARATION

I hereby affirm that I am licensed under the 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 No. _____ License Class _____

Contractor _____ Exp. _____
 Date _____

- I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051 Business and Professions Code).

Lic. or Reg No. _____ Exp. _____
 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):

- 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).

- I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a compensation lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that all of the information is correct. I agree to comply with all city 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.

SIGNATURE OF APPLICANT OR AGENT _____ **DATE** _____

BOOK	PAGE	PARCEL

**CITY OF SIERRA MADRE
BUILDING DEPARTMENT**

PROJECT NO. _____

**BUILDING
PERMIT – APPLICATION**

BUILDING ADDRESS		DATE	ZONE	TYPE CONST.	PROCESSED BY
OWNER'S NAME		PROPERTY DETAILS			
MAILING ADDRESS		SIZE OF LOT		NO. OF BUILDINGS NOW ON LOT	
CITY	TEL. NO.	USE OF EXISTING BUILDING		NO. OF DWELLING UNITS	
EMAIL	ARCHITECT OR CONTRACTOR	BUILDING SETBACK	YARD	HWY	STREET NAME
ADDRESS		FRONT P.L.			EXISTING WIDTH
	CITY STATE	TEL. NO.	SIDE P.L.		
EMAIL	INSPECTION RECORD				
LICENSE NO	CITY BUS. LIC. NO.				
DESCRIPTION OF WORK					
NEW	ADD	ALTER	REPAIR	DEMOLISH	
SQ. FT. SIZE	NO. OF STORIES		NO. OF FAMILIES		
SCOPE OF WORK					
I acknowledge that I have read this application and state that the above is correct and agree to comply with all city and state laws regulating building. I certify that I am properly registered and/or licensed as required by the City of Sierra Madre and State of California or that I am the legal owner of the above described residential property. No person shall be employed in violation of the Labor Code of the State of California. A Certificate of Insurance is required.					
SIGNATURE OF APPLICANT <input checked="" type="checkbox"/>					
APPROVALS		DATE		INSPECTOR'S SIGNATURE	
FOUNDATION: LOCATION FORMS, MATERIALS					
FRAME: FIRE STOPS, BRACING, BOLTS					
FURNACE: LOCATION, GAS VENT, DUCTS					
INSULATION					
LATH, INT.					
LATH, EXT.					
HOUSE NUMBER CORRECT AND POSTED					
FINAL					
VALUATION		\$			
BUILDING PERMIT FEE		\$			
DEVELOPMENT FEE		\$			
BSASRF		\$			
SMIP		\$			
SB 1186 DSA FEE		\$			
OTHER		\$			
TOTAL		\$			

ALL PERMIT FEES ARE NON-REFUNDABLE. A DOUBLE FEE WILL BE CHARGE IF WORK IS STARTED BEFORE PERMIT IS ISSUED.

Issued by _____ Date _____

VALIDATION This is a building permit when properly filled out, signed and validated. Permit void if meaningful inspection not completed within 180 days of issuance. The applicant and each successor in interest to the property which is the subject of this project approval, shall defend, indemnify and hold harmless the City of Sierra Madre and its agents, officers and employees from any claim, action or proceeding against the City or its agents, officers or employees to attack, set aside, void or annul any approval of the City, City Council, Planning Commission, City Manager, or City Directors concerning this use.