111 Greenwood

Phone: 668-5655

CITY OF BLUE LAKE

# APPLICATION & PERMIT

BUILDING DEPARTMENT

Please fill out all highlighted sections

## 1 SITE INFORMATION

PROJECT ADDRESS

ASSESSOR PARCEL NUMBER | NEAREST CROSS STREET

OWNER | PHONE

MAIL ADDRESS

CONTRACTOR | STATE LICENSE NO.

MAIL ADDRESS | PHONE

DESCRIPTION OF WORK

## 2 LEGAL DECLARATIONS

### 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.

Lic. Number _____ License Class _____

Contractor _____ Date _____

### OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason:

☐ 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.

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project.

☐ I am exempt under Sec. _____, B., & P. C. for this reason:

_____

Owner _____ Date _____

### WORKERS' COMPENSATION DECLARATION

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

Company _____ Policy No. _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the Building Dept. City of Blue Lake

Applicant _____ Date _____

### 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 of California.

Applicant _____ Date _____

**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.

### CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction 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 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 county to enter upon the above-mentioned property for inspection purposes.

### NOTICE

*THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS ANY TIME AFTER WORK IS COMMENCED.*

_____

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT

_____

SIGNATURE OF OWNER (IF OWNER BUILDER)

## 3 BUILDING

USE OF BUILDING | DESCRIPTION

| GROUP | DIVISION | TYPE OF CONSTRUCTION | DWELLING UNITS |
|---|---|---|---|
| | | | |

| NEW | ADD/ALTER | REPAIR | MOVE | DEMOLISH |
|---|---|---|---|---|
| | | | | |

SIZE OF BUILDING ____'X____' = ____ SQ. FT. @ $____ ' = $ VALUATION

SIZE OF GARAGE ____'X____' = ____ SQ. FT. @ $____ ' = $

PORCHES, PATIO, FIREPLACE, ETC. ____'X____' = ____ SQ. FT. @ $____ ' = $

TOTAL VALUATION $

Plan Check Fee $

BUILDING PERMIT FEE $

ADA $4.00 CBSC $_____

STATE SEISMIC FEE $

## 4 PLUMBING

| No. | Type Fixture or Item | Each | FEE |
|---|---|---|---|
| | Water Closet (Toilet) | | |
| | Bath Tub | | |
| | Shower | | |
| | Lavatory (Wash Basin) | | |
| | Kitchen Sink | | |
| | Laundry Tub or Tray | | |
| | Clotheswasher Waste Pipe | | |
| | Dishwasher | | |
| | Garbage Disposal | | |
| | Water Piping System | | |
| | Gas Line System | | |
| | Water Heater with Vent | | |
| | House Sewer | | |
| | Other | | |
| | | | |
| | Issuance Fee | | |

PLUMBING PERMIT FEE $

## 5 MECHANICAL

| No. | | Each | FEE |
|---|---|---|---|
| | Heating Appliance | | |
| | | | |
| | | | |
| | | | |
| | Issuance Fee | | |

MECHANICAL PERMIT FEE $

## 6 ELECTRICAL

| No. | | Each | FEE |
|---|---|---|---|
| | Fixtures | | |
| | Switches - Receptacles | | |
| | Range | | |
| | Amp - meter | | |
| | Dryer | | |
| | Sub Panel | | |
| | Battery Backup | | |
| | Solar | | |
| | Issuance Fee | | |

ELECTRICAL PERMIT FEE $

REFERRAL FEES $

TOTAL PERMIT FEES $

WHEN PROPERLY VALIDATED THIS IS YOUR PERMIT

ISSUED BY _____

Cash Check No. _____

PERMIT NUMBER