

APPLICATION FOR BUILDING PERMIT



CITY OF LARKSPUR
400 Magnolia Avenue, Larkspur, CA 94939
(415) 927-5038

Permit No. _____
Date Issued _____
Receipt No. _____
TOTAL _____

*Cal Health & Safety Code § 19825 (2001) § 19825.
Required declarations.*

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury 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 Class _____ License No. _____

Contractor: _____ Date: _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the following reason (*Sec. 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. (*Sec. 7044, Business and Professions Code*)

____ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project. (*Sec. 7044, Business and Professions Code*)

____ I am exempt under Sec. _____, Business and Professions Code for this reason:

Owner: _____ Date: _____

WORKERS' 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 is 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:

Carrier _____ Policy Number _____

Signature: _____

____ 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, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant: _____

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury 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 _____

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 DOLLARS (\$ 100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

Project Address _____

(Include Suite No and Tenant Name, if applicable)

Building Type (circle one): Residential Commercial Other

Assessor's Parcel No. _____

Property Owner: _____

Telephone/Cell phone: _____

Address if different than Project Address: _____

Contractor: _____

Address: _____

City/State/Zip: _____

Tel/Cell: _____

FAX: _____

Architect/Engineer: _____

Contact: _____

Address: _____

City/State/Zip: _____

Tel/Cell: _____

FAX: _____

Job Value (include labor & materials): _____

Description of work (details): _____

Has this project been subject to a Planning permit approval. If yes, provide application no.: _____

I certify I have read this application and that the information I have provided herein is correct to the best of my knowledge. I agree to comply with all city, county and state laws relating to building construction, and hereby authorize representatives of this city to enter the project property for inspection purposes.

Applicant signature: _____ Date: _____

Print Name: _____

NOTE: WHEN PROPERLY VALIDATED THIS FORM CONSTITUTES A BUILDING PERMIT. THIS PERMIT EXPIRES AND BECOMES NULL AND VOID SHOULD WORK NOT BE COMMENCED WITHIN 180 DAYS FROM THE DATE OF APPROVAL, OR SHOULD AUTHORIZED CONSTRUCTION BE SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER WORK IS COMMENCED.

DEPARTMENT USE ONLY

COMMENTS/CONDITIONS: _____

APPROVALS

PLANNING _____ Date: _____

DPW/ENGINEER _____ Date: _____

FIRE _____ Date: _____

BUILDING _____ Date: _____

DEPARTMENT USE ONLY

ADDITIONAL CONDITIONS/COMMENTS: _____

Permit Fee\$ _____
Electrical _____
Plumbing _____
Mechanical _____
T-24 Energy Insulation (charged for new sq. ft)..... _____
Plan Check _____
Outside Plan Check _____
Outside Plan Check, 15% overhead fee _____
Ord. No. 428/Bedrooms _____
SMIP _____
Plan Retention (# of pages)..... _____
Planning Review _____
Engineering Review _____
Road Impact _____
General Plan Maint. Fee _____
Penalty Fees..... _____
Business Fee (non-resident contractor)..... _____
Misc..... _____
TOTAL.....\$ _____