



Community Development Department Building & Safety Division

100 Civic Plaza, Dublin, CA 94568 • Ph: (925) 833-6620 • Fax: (925) 833-6628 • www.dublin.ca.gov

Permit Application Worksheet

Permit No.: _____

PROJECT ADDRESS: _____

PROJECT DESCRIPTION: _____

TYPE OF WORK: Residential Commercial Total valuation (cost) \$ _____ (verified)

New Residential: Project: _____ Tract # _____ Lot No. _____ Plan/Elev: _____ No. Stories: _____

Area of Work (Residential/Commercial): New Existing Addition Existing building size: _____ ft²

Floor: _____ ft² Garage: _____ ft² Porch/Deck: _____ ft² No. of Stories: _____ # of Units: _____

Occupancy group: _____ Construction type: _____ Occupant load: _____ Zoning: _____

Fire sprinklers: Yes No Air conditioning: Yes No Total impervious area: _____ ft²

APPLICANT:

Name/Company: _____

Address: _____ City/State/Zip: _____

Phone: (____) _____ Fax: (____) _____ Cell: (____) _____

Project Contact Name: _____

Preferred method of contact: Phone Fax Email: _____

Signature: _____ Date _____

PROPERTY OWNER: Same as applicant

TENANT: Same as applicant

Name: _____

Company: _____

Address: _____

City/State/Zip: _____

Ph: (____) _____ Fax: (____) _____

Owner's Signature: _____

ARCHITECT or ENGINEER: Same as applicant

CONTRACTOR: Same as applicant

Licensed Design Professional (Arch. or Eng.) in charge of project:

License No.: _____

Company: _____

Contractor Name: _____

Company: _____

City Business License No.: _____

Mailing Address: _____

City/State/Zip: _____

Ph: (____) _____ Fax: (____) _____

EPA's Renovation, Repair and Painting Program (RRP Rule) requires that firms performing renovation, repair, and painting projects that disturb lead-based paint in homes, child care facilities and pre-schools built before 1978 have their firm certified by EPA (or an EPA authorized state), use certified renovators who are trained by EPA-approved training providers and follow lead-safe work practices.

_____ (Initials) I have read and acknowledge that under federal law, it is unlawful to use work practices that create a lead hazard and contaminate the environment. Visit the Alameda County Healthy Homes Department at www.achhd.org or call (510) 567-8280. Or refer to www.epa.gov/getleadsafe.

LICENSED CONTRACTOR'S DECLARATION

CONTRACTOR

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.

Contractor License Number and Class: _____ Contractor Signature: _____ Expiration Date: _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractor's State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure 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, as owner of the property, or my employees with wages as their sole compensation, will do (all of or (portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the 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 it was not built or improved 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 Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.)

I am exempt from licensure under the Contractor's State License Law for the following reason: _____
By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following website:
<http://leginfo.ca.gov/faces/codes.xhtml>

Signature of Property Owner or Authorized Agent: _____ Date: _____

WORKER'S COMPENSATION DECLARATION

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUAND 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.

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, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No.: _____

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 No.: _____ Expiration Date: _____
Name of Agent: _____ Ph. No.: _____

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.

Signature of Applicant: _____ Date: _____

DECLARATION REGARDING 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 (Section 3097, Civil Code).

Lender's Name: _____ Lender's Address: _____

Must be completed: By my signature below, I certify to each of the following:

- I am the property owner or authorized to act on the property owner's behalf.
- I have read this application and the information I have provided is correct.
- I agree to comply with all applicable city and county ordinances and state laws relating to building construction.
- I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

Signature of Property Owner or Authorized Agent: _____ Date: _____

*** When the Permit Application and the Owner-Builder Declaration have been executed by a person other than the property owner, prior to issuing the permit, the following shall be completed by the property owner and returned to the agency responsible for issuing the permit. (See Health and Safety Code 19825 (a))**

IMPORTANT APPLICANT IS HEREBY MADE TO THE CHIEF BUILDING OFFICIAL FOR A PERMIT SUBJECT TO THE CONDITIONS/RESTRICTIONS SET FORTH ON THIS APPLICATION AND THE FOLLOWING: 1) Construction activity is prohibited between the hours of 7 pm and 7 am and on Sundays and Holidays. 2) The approved plans and Permit Inspection Card must remain on the job site. 3) Final inspection of the work authorized by this permit is required.
INSPECTION REQUESTS: Can be placed by calling (925) 833-6620 no later than 4 pm, M-F on the workday before the desired inspection date.
INSPECTOR'S OFFICE HOURS: Monday-Friday between 7 am - 8 am.

DECLARATIONS

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 the City of Dublin to enter upon the job premises at any reasonable time to inspect any work installed under this permit, to remove any nonconforming construction at my expense and to otherwise act as and when required by the City of Dublin.

Signature of Owner, Agent, Builder, Officer: _____

Print Name: _____ **Date:** _____