

Departments	Approved	Date
Planning		
Environmental Health		
Dept. of Public Works		

Table above to be completed by County staff

CONSTRUCTION PERMIT APPLICATION

California Health and Safety Code Section 19825

Tracking # _____

Permit Number: _____

Plans Received: _____

Issued Date: _____

Zoning: _____

#1 IDENTIFY YOUR BUILDING PROJECT

What is it you are trying to do? Please describe ALL work to be performed under this building permit and the USE of the space or structure (additional space available on page 2)

How much is this going to cost? TOTAL contract amount or dollar value of all work to be performed under this permit

Project Location

Address of Project _____

City, State, Zip _____

Locality _____ Nearest Cross Street _____

Assessor Parcel Number _____ Number of Units _____

Check all that apply:

- New Construction
- New Addition
- Change of Use/Conversion
- Remodel Existing
- Misc Improvement
- Repair Existing
- Code Enforcement Case

Project Data Table (please provide areas in square feet)					
	Existing	Proposed		Existing	Proposed
1 st Floor Area			Area of Addition		
2 nd Floor Area			Area of Remodel		
3 rd Floor Area			Area of Decks		
Garage Floor Area			Total Area		

Property Owner Contact Information:

Property Owner Information _____ Telephone _____

Mailing Address _____

City, State, Zip _____ Email _____

Project Applicant Contact Information:

Licensed Design Professional
in charge of project _____ Telephone _____

Address _____

City, State, Zip _____ Email _____

Additional Information for Plan Review or Inspection Staff

Please use this space to provide important helpful information, difficult directions to job site, contact name and phone number for coordinating inspections, gate codes, etc.

Property Tenant Name and Phone Number (if applicable): _____

Intake Completeness Record: (This area for CDA Use Only)

Plans [] NR/NA Recd by _____ Date _____	Lead cert [] NR/NA Recd by _____ Date _____
Lic # Verified by _____ Date _____	C&D form [] NR/NA Recd by _____ Date _____
OB form Verified by _____ Date _____	WComp [] NR/NA Verified by _____ Date _____
Will Serve: water [] NR/NA Recd by _____ Date _____	sewer [] NR/NA Recd by _____ Date _____
Fire (describe) _____	Verified by _____ Date _____
School Fees (describe) _____	Verified by _____ Date _____
Other (describe) _____	Verified by _____ Date _____

#2 IDENTIFY WHO WILL PERFORM THE WORK (Complete either 2a or 2b)

This permit is to be issued in the name of the () Licensed Contractor or () the Property Owner as the permit holder of record who will be responsible and liable for the construction. (check one)

2a – CALIFORNIA 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.

Contractor Name: _____ Telephone Number _____

Mailing Address: _____

City, State, Zip: _____ Email Address: _____

License Class and No. _____ Contractor Signature _____

2b – OWNER-BUILDER'S DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' 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 Contractors' 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 Web site: <http://www.leginfo.ca.gov/calaw.html>.

Property Owner or Authorized Agent signature _____ Date _____

#3 IDENTIFY WORKERS' COMPENSTATION COVERAGE AND LENDING AGENCY

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.

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, 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 _____ Tel 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.

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 and Address _____

#4 DECLARATION BY CONSTRUCTION PERMIT APPLICANT

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

I am a California licensed contractor or the property owner* or authorized to act on the property owner's behalf**.

- I have read this CONSTRUCTION PERMIT 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.
- I recognize this CONSTRUCTION PERMIT APPLICATION expires in 365 days if permit is not issued.
- I agree to save, indemnify and keep harmless the County of Marin against liabilities, judgments, costs and expenses which may in any way accrue against said County in consequence of the granting of this permit.

California Licensed Contractor, Property Owner* or Authorized Agent**: **requires separate verification form*
***requires separate authorization form*

Signature _____ Date _____