

## Application for Permit Instructions

California State Law requires that every permit applicant provide specific information and declarations regarding the proposed work. Please read the information below and follow the directions pertaining to your particular permit application. All applications must include the information requested. If you are unsure about any item, the Building Division will assist you. Fill in ALL information completely and either type or print legibly in blue or black ink. Applications may be submitted directly to the Building Division located at 300 Richards Blvd. Sacramento, CA 95811.

### **Identify the Project**

- **Project Location:** Accurate property identification is very important. Please provide the property location/street address and either the lot, building, or suite number. Please note that addresses for new building construction will be issued by the City of Sacramento Community Development Department after permit submittal.
- **Property Owner Information:** Please complete this section with the property owner's information.
- **Licensed Design Professional Information:** If the project has a licensed architect or a licensed engineer, please complete this section. If not, please write "Not applicable" or "N/A"
- **Residential and Commercial Section:** Check the appropriate box(es) to describe the type of project. If applicable, please also complete the SF (square footage) areas and/or Description of Work section. Please also complete the value section.

### **Identify the Construction Lending Agency**

If there is a construction lending agency for the project, please complete this section. If there is no lending agency, please write "Not applicable" or "N/A".

### **Identify Permit Holder of Record**

The permit holder of record can only be either the licensed contractor of record or the property owner (owner-builder). The person signing the permit application must either be the contractor, property owner (requires separate verification form), or an authorized agent of the permit holder (requires separate authorization form).

### **Identify Who will Perform the Work**

Complete either the "California Licensed Contractor's Declaration **OR** the "Owner-Builder Declaration" in this section.

- **California Licensed Contractor's Declaration:** This section should only be completed if the permit holder is a licensed contractor. This statement may be signed by the contractor or an authorized agent for the contractor, providing that the Building Division has a letter on file from the contractor authorizing the agent to sign.
- **Owner-Builder Declaration:** This section should only be completed if the permit holder is the property owner (owner-builder). This statement may be signed by the property owner or an authorized agent for the property owner (requires separate authorization form). In every case, a separate "Owner-Builder Notice, Acknowledgement, Verification, & Authorization" form must also be completed and signed by the *property owner*.

### **Identify Worker's Compensation Coverage**

This section should be completed for all projects. Please check the applicable box indicating whether the permit holder has workers' compensation insurance or is exempt from worker's compensation insurance. If the first box is checked, a valid Certificate of Consent to Self Insure must be provided to the Building Division at the time of permit issuance. This certificate must include the policy number. If the second box is checked, a valid Certificate of Worker's Compensation Insurance must be provided to the Building Division at time of permit issuance. This certificate must show the insurance agent's name and phone number, the worker's compensation carrier, policy number, and expiration date. The third box is checked only when the property owner or contractor will have no employees on the job. This declaration must be signed by either the permit holder or an authorized agent.

*THIS APPLICATION IS NOT A PERMIT. A VALID PERMIT RESULTS WHEN PART II IS APPROVED AND ISSUED BY THE CITY OF SACRAMENTO BUILDING DIVISION. PERMIT FEES MUST BE PAID AND RECEIPT ACKNOWLEDGED. AN APPLICATION IS DEEMED ABANDONED 180 DAYS AFTER FILING UNLESS THE BUILDING OFFICIAL DETERMINES THE APPLICATION HAS BEEN PURSUED IN GOOD FAITH OR GRANTS AN EXTENSION(S) (CBC CHAPTER 1 SECTION 105.3.2).*

**BE SURE ALL NECESSARY SIGNATURES ARE OBTAINED**

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**Permit #:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Project Location:** Address: \_\_\_\_\_  
 (Lot#, Bldg #, or Ste #): \_\_\_\_\_ Parcel Number (APN): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Property Owner:** Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Licensed Design Professional Information:** *(Architect or Engineer in charge of the project.)*  
 Name: \_\_\_\_\_ Lic. #: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Licensed Contractor Information:** Company Name: \_\_\_\_\_  
 Lic #: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**Project Contact:** Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Permit Holder:**  Owner  Contractor  To-be-Determined prior to Permit Issuance (plan review request only)  
*Please note: building permits are non-transferable. Refunds, if any, shall be issued to the Permit Holder of record.*

**If you qualify and choose to participate in any of the fee programs below, check the appropriate box(s):**  
 **SCIP and/or Fee Credits**  **Fee Deferral**

**Is this a Regulated Affordable Housing Project?**  Yes  No (If yes, form CDD-0410 is also required)

**Plan Review Process:**  **Electronic Plan Check (EPC)**  **Standard Paper Submittal**  
*Please note: Projects with a valuation \$1M and over must submit via EPC*

**Residential**

**Reroof:** # Squares \_\_\_\_\_ Material \_\_\_\_\_  
 **HVAC:** Change-out / Cut-in  ; Split system   
 Package system ; Roof Mount ; Ground   
 **Siding:** Type: \_\_\_\_\_  
 **Master Plan :** Plan #/Option: \_\_\_\_\_  
 **Pool:**  Pool  Pool/Spa  Spa  
 **Remodel or Repairs** (describe below)  
 **Wrecking Permit** (Also requires form CDD-0233)

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**Production Permit** MP# \_\_\_\_\_  
 **Single Family**  **Duplex**  **Halfplex**  
 **Addition** Total: \_\_\_\_\_ SF; No. of Bedrooms: \_\_\_\_\_  
**New Square Footage proposed by Addition or New building:**  
 1<sup>st</sup> FL: \_\_\_\_\_ 2<sup>nd</sup> FL : \_\_\_\_\_ Garage: \_\_\_\_\_  
 Basement: \_\_\_\_\_ Patio/Deck: \_\_\_\_\_ Other: \_\_\_\_\_  
 No of Stories: \_\_\_\_\_ Total Aggregate Landscape Area: \_\_\_\_\_

**Commercial**

**Reroof:** # Squares \_\_\_\_\_ Material \_\_\_\_\_  
 **New Building:** Total: \_\_\_\_\_ SF  
 **Apartments:** # of Bldgs \_\_\_\_\_ # of Units \_\_\_\_\_  
 **Condominium:** # of Bldgs \_\_\_\_\_ # of Units \_\_\_\_\_  
 No of bedrooms per each unit : \_\_\_\_\_  
 **Addition:** Total: \_\_\_\_\_ SF  
 **Tenant Improvement:** Existing: \_\_\_\_\_ SF  
 **Pool:**  Pool  Pool/Spa  Spa  
 **Remodel or Repairs**(Describe Below, w/sqft.)  
 **Sign** (Also requires form CDD-0274)  
 **Wrecking Permit** (Also requires form CDD-0233)  
 **Phased Permit;**  **FPP** (Describe Below)  
 **Other** (Describe Below)  
 Total Aggregate Landscape Area: \_\_\_\_\_

**Description of Work:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Value** (include all LABOR & MATERIALS):\$ \_\_\_\_\_ Construction Type: \_\_\_\_\_ Occupancy: \_\_\_\_\_

**This Section to be Complete by City Staff: DISCIPLINE ROUTING** (Check all those that apply):  
 Residential ; Structural ; Life Safety ; Elec ; Plmg/Mech ; Fire ; Dev Eng ; Utilities ; Landscape ;  
 Air Quality ; County Health ; Const. Debris ; Planning ; Preservation ; Design Review ; OSHPD-III

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Address:

Permit #:

Identify Permit Holder of Record

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.

Permit Holder's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Identify who will Perform the Work

(COMPLETE THE "CALIFORNIA LICENSED CONTRACTOR'S DECLARATION" OR THE "OWNER-BUILDER DECLARATION")

California Licensed Contractor's Declaration

I herby 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.

CA Contractor's License Number: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Contractor or Authorized Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner-Builder Declaration

I herby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the following reason(s) indicated below by the checkmark(s) I have placed next to the applicable items(s) (Sec.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]).

Please check all that apply for the following:

- checkbox I, as owner of the property, or my employees with wages as their sole compensation will do
checkbox ALL OF or checkbox PORTIONS OF the work, and the structure is not intended or offered for sale.
checkbox I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project
checkbox 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.

Property Owner or Authorized Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: A valid permit results when Part II is issued by the Building Division.

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Address:

Permit #:

Identify the 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. (3097 Civil Code)

Lender's Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Will the ownership, operation, or funding of the proposed project or portions thereof cause it to fall within the definition of "Public Housing" as defined in the California Building Code? YES  NO

Identify Workers' Compensation Coverage

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.

I herby 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:

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name of Insurance Agent: \_\_\_\_\_ Phone #: \_\_\_\_\_

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.

Contractor, Property Owner, or Authorized Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

BY MY SIGNATURE BELOW, I CERTIFY TO EACH OF THE FOLLOWING STATEMENTS:

I am the property owner, contractor, or authorized to act on the property owner's or contractor'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, rules, regulations, and State laws relating to building construction, and with any and all conditions of permit. I agree to defend, indemnify, and hold harmless the City of Sacramento, its officers, agents, and employees from any and all claims and liability for personal injury, including death, and property damage caused by, arising out of, or in any way connected with the issuance of this permit. I hereby acknowledge that issuance of this permit does not authorize the use or occupancy of any sidewalk, street, or subsidewalk. I authorize representatives of the City of Sacramento to enter the above mentioned property for inspection purposes.

Contractor, Property Owner\*, or Authorized Agent's Signature\*\*: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Relationship to Project: \_\_\_\_\_

\*Requires verification

\*\*Requires separate authorization form

Note: A valid permit results when Part II is issued by the Building Division.