

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 must be submitted to the Building Division electronically at <https://aca-prod.accela.com/sacramento/Default.aspx>.

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: _____ Email: _____ Phone: _____	
LICENSED DESIGN PROFESSIONAL INFORMATION (Architect or Engineer in charge of the project.) Name: _____ License #: _____ Email: _____ Phone: _____	
LICENSED CONTRACTOR INFORMATION Company Name: _____ License #: _____ Email: _____ Phone: _____	
PROJECT CONTACT Name: _____ Phone: _____ Email: _____	
PERMIT HOLDER <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> To-be-Determined prior to Permit Issuance (plan review request only) <i>Please Note: Building permits are non-transferable. Refunds, if any, shall be issued to the Permit Holder of record.</i>	
IF YOU QUALIFY AND CHOOSE TO PARTICIPATE IN ANY OF THE FEE PROGRAMS BELOW, CHECK THE APPROPRIATE BOX(S): <input type="checkbox"/> SCIP and/or <input type="checkbox"/> Fee Credits <input type="checkbox"/> Fee Deferral	
IS THIS A REGULATED AFFORDABLE HOUSING PROJECT? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, form CDD-0410 is also required.)	
BUILDING TYPE* <input type="checkbox"/> All-Electric Building <input type="checkbox"/> Mixed-Fuel Building Limited Exemption from All-Electric Requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, describe exemption in description below.) Approved Infeasibility Waiver Record #: _____ <i>* The above items, applicable to the project, must be visibility noted on the plans cover sheet. See plan submittal checklists.</i>	
RESIDENTIAL	COMMERCIAL
<input type="checkbox"/> Reroof: # Squares _____ Material _____ <input type="checkbox"/> HVAC: <input type="checkbox"/> Change-out/Cut-in; <input type="checkbox"/> Split system; <input type="checkbox"/> Package system; <input type="checkbox"/> Roof Mount; <input type="checkbox"/> Ground <input type="checkbox"/> Siding: Type: _____ <input type="checkbox"/> Master Plan: Plan #/Option: _____ <input type="checkbox"/> Pool: <input type="checkbox"/> Pool Only <input type="checkbox"/> Pool and Spa <input type="checkbox"/> Spa Only <input type="checkbox"/> Remodel or Repairs (describe below) <input type="checkbox"/> Wrecking Permit (Requires form CDD-0233)	<input type="checkbox"/> Reroof: # Squares _____ Material _____ <input type="checkbox"/> New Building: Total: _____ SF <input type="checkbox"/> Apartments: # of Buildings _____ # of Units _____ <input type="checkbox"/> Condominium: # of Buildings _____ # of Units _____ # of bedrooms per each unit: _____ <input type="checkbox"/> Addition: Total: _____ SF <input type="checkbox"/> Tenant Improvement: Existing: _____ SF <input type="checkbox"/> Pool: <input type="checkbox"/> Pool Only <input type="checkbox"/> Pool and Spa <input type="checkbox"/> Spa Only <input type="checkbox"/> Remodel or Repairs (describe Below, w/SF) <input type="checkbox"/> Sign (also requires form CDD-0274) <input type="checkbox"/> Wrecking Permit (also requires form CDD-0233) <input type="checkbox"/> Phased Permit <input type="checkbox"/> FPP (describe below) <input type="checkbox"/> Other (describe below) Total Aggregate Landscape Area: _____
<input type="checkbox"/> Production Permit MP# _____ <input type="checkbox"/> Single Family <input type="checkbox"/> Duplex <input type="checkbox"/> Halfplex <input type="checkbox"/> Addition Total: _____ SF; # of Bedrooms: _____ New Square Footage proposed by Addition or New building: 1 st FL: _____ 2 nd FL: _____ Basement: _____ Garage: _____ Patio/Deck: _____ Other: _____ # of Stories: _____ Total Aggregate Landscape Area: _____	
DESCRIPTION OF WORK	
_____ _____ _____ _____	
VALUE (include <u>ALL</u> labor & materials): \$ _____ Construction Type: _____ Occupancy: _____	

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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 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.

CA Contractor's License Number: _____ Class: _____ Expiration Date: _____

Contractor or Authorized Agent's Signature: _____ 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(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:

- 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.
I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project
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: https://leginfo.legislature.ca.gov/

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 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 #: _____

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.