



CITY OF SOLEDAD BUILDING PERMIT APPLICATION

FOR OFFICE USE ONLY

City of Soledad – Building Department
248 Main Street, Soledad, CA 93960
(T) 831-223-5000 ♦ (F) 831-678-3965

buildingpermits@cityofsoledad.com

DATE: _____

APP/PERMIT # _____

REC'D BY: _____

PLEASE PRINT CLEARLY AND FILL THIS FORM OUT ENTIRELY

PROJECT ADDRESS: _____ Soledad, Ca APN # _____

CONTACT PERSON: _____ PHONE # _____ EMAIL: _____

PROPERTY OWNER

ARCHITECT DESIGNER ENGINEER

NAME: _____ LICENSE/REGISTRATION #: _____

ADDRESS: _____ NAME/COMPANY: _____

CITY/STATE/ZIP: _____ ADDRESS: _____

PHONE #: _____ CITY/STATE/ZIP: _____

EMAIL ADDRESS: _____ PHONE #: _____ FAX #: _____

APPLICANT: OWNER-BUILDER AGENT CONTRACTOR

Owner-Builder/Agent Info:

NAME: _____

PHONE #: _____ FAX #: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

EMAIL ADDRESS: _____

Contractor Info:

NAME: _____

PHONE #: _____ FAX #: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

LICENSE #: _____ LICENSE CLASS: _____

EMAIL ADDRESS: _____

DESCRIPTION OF WORK: (Please fill-in and mark all that apply) NONRESIDENTIAL RESIDENTIAL

CONSTRUCTION VALUATION: \$ _____

- | | | | |
|---|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> SINGLE FAMILY DWELLING | <input type="checkbox"/> COMM. STRUCTURE | <input type="checkbox"/> ADU or JADU | <input type="checkbox"/> DEMOLISH |
| <input type="checkbox"/> ADDITION/REMODEL | <input type="checkbox"/> FIRE SPRINKLERS | <input type="checkbox"/> SIGN | <input type="checkbox"/> GRADING ONLY |
| <input type="checkbox"/> TENANT IMPROVEMENT | <input type="checkbox"/> FIRE ALARM SYSTEM | <input type="checkbox"/> SOLAR SYSTEM | <input type="checkbox"/> OTHER |

DESCRIPTION/SCOPE OF WORK: _____

TOAL SQ. FT. OF PROPOSED PROJECT: _____

DESCRIPTION OF BUILDING: (Please fill-in and mark all that apply)

- | | | | | |
|--|---|-------------------------------------|--|--|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> Duplex | <input type="checkbox"/> Store | <input type="checkbox"/> Accessory Building | <input type="checkbox"/> City/County Owned |
| <input type="checkbox"/> Multi Family | <input type="checkbox"/> Apartment Building | <input type="checkbox"/> Industrial | <input type="checkbox"/> Office/Bank/Professiona | <input type="checkbox"/> Medical Building |
| <input type="checkbox"/> Townhouse | <input type="checkbox"/> Restaurant | <input type="checkbox"/> Church | <input type="checkbox"/> Other _____ | |

Building Area: _____ Sq. Ft. Garage Area: _____ Sq. Ft. # of Units: _____

Number of bedrooms: _____ Number of bathrooms: _____ Total Number of Rooms: _____

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 Signature: _____ **Date:** _____

IDENTIFY WORKERS' COMPENSATION 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, INTERES, AND ATTORNEY'S FEES.

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided 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 performance of the work for which this permit is issued, I shall not employ any person in any manner as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

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:** _____

DECLARATION BY BUILDING 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**

** requires separate verification form **requires separate authorization form*

I have read this building 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.

Signature: _____ Date: _____