



# CITY OF DUBLIN

# BUILDING & SAFETY DIVISION

100 Civic Plaza, Dublin, California 94568

Website: <http://www.ci.dublin.ca.us>

Phone: (925) 833-6620

Fax: (925) 833-6628

## PERMIT APPLICATION WORKSHEET

Please print clearly and fill in all applicable information

**Project Address:** \_\_\_\_\_ **Permit No:** \_\_\_\_\_  
**Project Contact Person:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Preferred Method of Contact for Comments:**  Fax  Email Email (Optional): \_\_\_\_\_

**APN:** \_\_\_\_\_

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

Residential/Commercial (Circle One) Valuation \$ \_\_\_\_\_

Verified

**NEW (RESIDENTIAL):** Project \_\_\_\_\_ Tract #: \_\_\_\_\_ Lot # \_\_\_\_\_ Plan/Elev. \_\_\_\_\_ No. of Stories \_\_\_\_\_

**AREA OF WORK (SQ. FT.):**  New  Existing  Addition  
Floor: \_\_\_\_\_ Garage: \_\_\_\_\_ Porch: \_\_\_\_\_ Deck: \_\_\_\_\_ Story: \_\_\_\_\_ # of Units \_\_\_\_\_

**PROPOSED ADDITION (SQ.FT.)** Floor \_\_\_\_\_ Garage \_\_\_\_\_ Other \_\_\_\_\_ # of Units \_\_\_\_\_

**FIRE SPRINKLERS:**  Yes  No **AIR CONDITIONING:**  Yes  No **IMPERVIOUS SQ FT** \_\_\_\_\_

**OCCUPANCY USE:** \_\_\_\_\_ **CONSTRUCTION TYPE:** \_\_\_\_\_ **ZONING:** \_\_\_\_\_ **TOTAL IMPERVIOUS SQ. FT.:** \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

PROPERTY OWNER  TENANT

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Business Name (Tenant): \_\_\_\_\_  
Owner's Signature: \_\_\_\_\_

ARCHITECT  ENGINEER

Licensed Design Professional (Architect or Engineer) in charge of the project: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
License No. \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### APPLICANT

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Email: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

### For Office Use Only

Date Received:	Plan Check Fee:	Business License Verified: <input type="checkbox"/>
Ready to Issue:	Waste Management Form Given : <input type="checkbox"/> Yes <input type="checkbox"/> No _____ Staff Initials	Contractor's License Verified: <input type="checkbox"/>
School District Fees Due? (Greater than 500 sq.ft.) <input type="checkbox"/> Yes <input type="checkbox"/> No	Impervious Surface Calculation Form Given to Applicant (Zone 7): <input type="checkbox"/> Yes <input type="checkbox"/> Not Required	
Grading Permit Required? (New buildings only): <input type="checkbox"/> Yes <input type="checkbox"/> No		

See Health and Safety Code 19825 (a)

<input type="checkbox"/> CONTRACTOR <input type="checkbox"/> CONTRACTOR HIRED BY HOMEOWNER  License No. _____ Class: _____ Company/Name: _____ Address: _____	<input type="checkbox"/> OWNER/BUILDER  Phone: _____ Fax: _____ City/State/Zip: _____
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**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.

License Class: \_\_\_\_\_ License Number: \_\_\_\_\_  
Date: \_\_\_\_\_ Contractor Signature: \_\_\_\_\_

**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 Web site: <http://www.leginfo.ca.gov/calaw.html>

Date \_\_\_\_\_ Signature of Property Owner or Authorized Agent \_\_\_\_\_

**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 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 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: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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 \_\_\_\_\_

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.

**IMPORTANT APPLICANT IS HEREBY MADE TO THE 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 7:00 p.m. and 7:00 a.m. 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 may be placed by calling (925) 833-6620 no later than 4:00 p.m. Monday through Friday on the workday before the desired inspection date. Inspectors Office Hours: Monday-Friday 7:00 a.m. – 8:00 a.m. (925) 556-4544 (no requests for inspections may be taken at this number)

**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.

BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature of Owner, Agent, Builder, Officer      Print Name of Applicant