

BUILDING INSPECTION DIVISION  
1133 P. STREET  
FIREBAUGH, CA 93622  
(559) 659-5900 PHONE  
(559) 659-3412 FAX



## Application for Reroof Permit

APPLICATION DATE: \_\_\_\_\_

PERMIT #: \_\_\_\_\_

Building Type:     Commercial                       Industrial                       Residential                       Other \_\_\_\_\_

Reroof Type:     Overlay                       Tear-Off                       Other \_\_\_\_\_

Project Address: \_\_\_\_\_ A.P.N. \_\_\_\_\_

Square Footage: \_\_\_\_\_ Valuation: \_\_\_\_\_

# of Existing Layers/Existing Roof: \_\_\_\_\_ Pitch of Roof: \_\_\_\_\_

Proposed Type of Roofing: \_\_\_\_\_

Proposed Underlayment: #1 Layer of #15 Felt \_\_\_\_\_ #2 Layer of #15 Felt \_\_\_\_\_ None \_\_\_\_\_

DESCRIBE REPLACEMENT OF ANY ROOF SHEETING AND/OR FRAMING:

\_\_\_\_\_  
\_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor License No: \_\_\_\_\_ Contractor Class: \_\_\_\_\_

City Business License: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### FOR DEPARTMENT USE ONLY

Building:                      \$                      SMOT:                      \$

Other:                      \$                      **TOTAL PERMIT FEES OWED: \$**

\*Additional fees may be required. Contact the City for more information.

\_\_\_\_\_  
**APPLICANT SIGNATURE(FIRMA)**

\_\_\_\_\_  
**DATE(FECHA)**

\_\_\_\_\_  
**REVIEWED BY**

**LICENSED CONTRACTOR 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 Professionals Code and that my contractor's license is in full force and effect and that all of the information provided by me regarding this is true and correct. I also affirm under penalty of perjury that my Worker's Compensation Declaration or Certificate of Exemption from Worker's Compensation Insurance and lend agency information is true and correct.

Signed \_\_\_\_\_ Dated \_\_\_\_\_  
Print Name of Signer \_\_\_\_\_  
License # \_\_\_\_\_ License Class \_\_\_\_\_

**WORKER'S COMPENSATION DECLARATIONS**

I hereby affirm that I have a certificate of self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3000, Lab. C)

Policy # \_\_\_\_\_ Company \_\_\_\_\_  
( ) Certified copy is hereby furnished  
( ) Certified copy is filed with the Building Department of the City of Firebaugh  
Applicant Signature \_\_\_\_\_ Dated \_\_\_\_\_

**OWNER-BUILDER DECLARATION**

I hereby affirm under penalty of perjury that I am exempt from provisions of Chapter 9, Division 3, B&D Code of the Contractor's License Law because (check applicable statement)

- ( ) A. I am the owner of the above property and I will contract to have all the work performed by licensed contractors.
- ( ) B. I am the owner of the property and the work will be partially accomplished in accordance with Statement "A" and the other work will be accomplished in Accordance with Statement "C".
- ( ) C. I am the owner of the above property and I will perform all the above work personally or through my employees whose sole compensation will be wages, and the above described structure is not intended or offered for sale.

Applicant Signature \_\_\_\_\_ Print Name of Signer \_\_\_\_\_  
Date \_\_\_\_\_

**CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE**

I certify that in 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 Worker's Compensation Laws of California.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE TO APPLICANT:** If after making this Certificate of Exemption you should become subject to the Worker's Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

**CONSTRUCTION LENDING AGENCY**

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Cir. C).

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

**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 THIS CITY TO ENTER THE MENTIONED PROPERTY FOR INSPECTION PURPOSES.**

Applicant or Agent Signature \_\_\_\_\_ Date \_\_\_\_\_