

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



Application for Building Permit
Aplicación Para Construcción

Application Date: (*Fecha*) _____ Building Permit #: _____

Building Type: (*Tipo de edificio*) Commercial (*comercial*) Industrial (*industrial*) Residential (*residencial*)
 Construction Type (*Tipo de construcción*) New Construction (*construcción nuevo*) Addition (*adición*)
 Remodel (*remodela*) Other (*otro*) _____
 Permit Type: (*Tipo de permiso*) Building (*edificio*) Mechanical (*mecánico*) Plumbing (*plomería*)
 Electrical (*eléctrico*)
 Description of Work: (*descripción de trabajo/proyecto*) _____

Project Address: (*domicilio de proyecto*) _____ City: (*cuidad*) Firebaugh, CA 93622
 Nearest Cross Street: (*calle principal*) _____ Valuation: (*valoracion*) _____
 A.P.N. (*numero del lote*) _____ Lot#: _____ Sq. Ft.: (*pies cuadrados*) _____

Owner Name: (*nombre del dueno*) _____ Phone: (*telefono*) _____
 Address: (*domicilio*) _____ City: (*cuidad*) _____ Zip: (*zona postal*) _____

Contractor: (*contratista*) _____ Phone: (*telefono*) _____
 Address: (*domicilio*) _____ City: (*cuidad*) _____ Zip: (*zona postal*) _____
 Contractor License No.: (*numero de licencia del contratista*) _____ Contractor Class: _____
 City Business License: (*licencia de ciudad*) _____ Email: _____

FOR DEPARTMENT USE ONLY

Building:	\$	City Fees:	\$
Plumbing:	\$	Plan Check:	\$
Electrical:	\$	SMOT:	\$
Mechanical:	\$	PLAN CHECK DEPOSIT:	\$
SUBTOTAL:	\$	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 _____



1133 "P" Street, Firebaugh, CA 93622

Tel: (559) 659-5900 Fax: (559) 659-3412

Declaration of Installation for Smoke Alarms and Carbon Monoxide Alarms

Building Permit # _____

Project Address: _____

Dear Property Owner or Licensed Contractor:

The California Residential Code (CRC) requires carbon monoxide alarms (CO alarms) in dwellings as well as smoke alarms when building permits are issued and the scope of work exceeds a total cost or calculated valuation of \$1,000. In order to grant a final approval on your permit, it is necessary to verify the installation of these alarms within your dwelling. This form provides the ability to self-verify to the Building Department staff when work done does not allow convenient access to the interior of the dwelling (e.g., re-roof or other exterior work).

As of January 1, 2014 all new and replacement battery operated smoke alarms must be equipped with a non-replaceable, non-removable battery capable of powering the alarm for ten years. All existing smoke alarms shall be replaced after ten year from the date of manufacture of if the date of manufacture cannot be determined.

DECLARATION OF INSTALLATION UNDER PENALTY OF PERJURY

By signing this document as the owner or licensed contractor, I/we affirm and declare under the penalty of perjury, under the laws of the State of California, by our signatures below as owner or licensed contractor, that I/we will comply prior to final inspection with Items A & B as specified herein:

- A. Smoke alarms are installed in accordance with the approved manufacturer's instructions in all of the following areas:
 1. Each sleeping room
 2. Outside each separate sleeping area in the immediate vicinity of the bedrooms
 3. On each floor, if a multi-story
 4. In the basement, if a basement exists

- B. Carbon Monoxide alarms are installed in accordance with the approved manufacturer's instructions in all of the following areas where fossil fuel burning appliances are installed, including fireplaces or when there is an attached garage to residence:
 1. Outside each sleeping room
 2. On every floor level of the dwelling unit, including basements, outside each sleeping unit.

Owner's name (print): _____

Owner's signature: _____ **Date:** _____

Contractor's name (print): _____ **CSLB License:** _____

Contractor's signature: _____ **Date:** _____