

Application for Residential Building Permit

Building Inspection Division 23 Russell Blvd, Davis, CA 95616 Phone: (530) 757-5610

Website: http://community-development.cityofdavis.org/ Email: OnlinePermits@cityofdavis.org

| For Official Use Only: | | |
|------------------------|--|--|
| Application #: | | |
| Rec'd by: | | |
| Plan Check: \$ | | |
| Total Fees Due: \$ | | |
| Call Confirmation: | | |

| PROJECT INFORMATION | : | | | | | |
|-----------------------------------------------------------------------------------------------------|-----------------------|-----------------------|--------------------------------------|--|--|--|
| Location (address): | | | | | | |
| Work Description: | | | ☐ See attached Scope of Work | | | |
| Total Estimated Value of Job (fair n | narket value of labor | and materials): \$ | | | | |
| CONTACT PERSON: | | Phone: | | | | |
| Email: | | Fax: | | | | |
| PROPERTY OWNER: | | | | | | |
| Name: | | Phone: (|) | | | |
| Address: | | Fax: (|) | | | |
| CONTRACTOR: Personal Nat | me: | | | | | |
| Business Name: | | Phone: (|) | | | |
| Address: | | Fax: (|) | | | |
| License # : | Class: | City Business License | e# | | | |
| OTHER: agent, architect, designer, developer, engineer, executor, realtor, tenant, other: License # | | | | | | |
| Name: | | Phone: (|) | | | |
| Address: | | Fax: (|) | | | |
| Is this Permit Application for work | already completed? | □Yes | □No | | | |
| Please fill in the square footage amounts appropriate to this application/permit: | | | | | | |
| Single family/Duplex: | Addition/Remodel: | | Porch: | | | |
| Multi-Family: | Storage Bldg/Shed: | | Trellis: | | | |
| Interior Remodel: | Garage: | | Deck/Balcony: | | | |
| Garage Conversion: | Carport: | | Other: | | | |
| Signature of Applicant: | | Circle | one: contractor, contractor's agent, | | | |
| Printed name of Applicant: | | | owner, owner's agent, other | | | |

| Licensed Contractor Declaration | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| I hereby affirm under penalty of perjury that I am a licensed under provision 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 NO License Class Date | | | | |
| Worker's Comp 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 INSECTION 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 Number Expiration Date | | | | |
| Name of Agent Phone # | | | | |
| \square 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. | | | | |
| Owner-Builder 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).): | | | | |
| \square I, as owner of the property, or my employees with wages as their sole compensation, will do \square all of or \square 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.).

Job Address _____

Permit Number _____

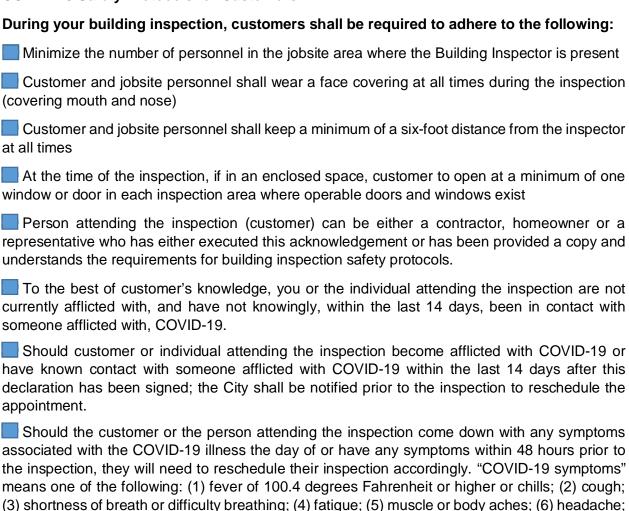
| I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.). |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \square I am exempt from licensure under the Contractors' State License Law |
| 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. |
| DateSignature of Property Owner |
| Applicant Declaration |
| By my electronic signature below, I certify under penalty of perjury that all of the information provided and declarations made in this application for a building permit are correct and true. In addition, 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. |
| \square I have read this application and the information I have provided is correct. |
| \square I agree to comply with all applicable city and county ordinances and state laws relating to building construction. |
| \square I authorize representatives of this city to enter the above-identified property for inspection purposes. |
| |
| Print Name |
| Print NameDate |

Building Inspection Program Safety Protocols and Customer Declaration

Signed declaration required to be executed prior to scheduling an in-person inspection

COVID -19 Safety Protocols for Customers

inspection, the City shall be notified immediately.



Where permissible in the judgement of the Building Inspector, customer is encouraged to work with the onsite Building Inspector to use tools such as facetime and photos to examine certain inspections. The Building Inspector may require that they physically inspect an item in person to final an inspection or a permit so long as it is done in accordance with the protocols defined in this declaration.

(7) new loss of taste or smell; (8) sore throat; (9) congestion or runny nose; (10) nausea or vomiting; or (11) diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19". To reschedule call, 530 757-5610 or emailing Cdsweb@cityofdavis.org. Staff will work to get you rescheduled as soon as possible for a re-inspection appointment. Should the customer or individual who attended the inspection come down with any symptoms associated with the COVID-19 illness after the

| By Signing below, you, the signer Property Owner, and/or Contractor, acknowledge and declare that you have read, understand and will adhere to Safety Protocols. | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------|--|--|--|
| Owner (Please Print Name) | (Signature) | (Date) | | | |
| | | | | | |

(Signature)

(Date)

These protocols shall be required to be acknowledged and agreed to by the applicant/customer

as part of the application process in order to obtain an in-person building inspection.

COVID -19 Safety Protocols for Building Inspectors

Contractor (if applicable) (Please Print Name)

Building Inspectors shall be required to wear a face covering and protective gloves

Building Inspectors have been trained on the proper use of Personal Protective Equipment

Building Inspectors shall sanitize their hands, before inspecting the property

Building Inspectors shall also maintain a minimum distance of six-feet from and make no physical contact with customers.

Building Inspectors will expect customer adherence to this signed declaration. If there is a lack of compliance the Building Inspector will first ask for compliance, if the customer does not respond appropriately, the Building Inspector will leave the jobsite and ask that you consult with their supervisor on rescheduling or completing a virtual inspection if possible.