	AU IMPED	
ECORD	NUMBER	

CONTRACTOR DECLARATIONS

1. LICENSED CONTRACTOR DECLARATION

Signature _____

			ection 7000) of Division 3 of the
License Number	Class	Expiration	
Contractor Signature			
WORKERS' COMPENSATION	DECLARATION		
I have and will maintain a certific provided by Section 3700 of the Labor	ate of consent to self-insure for Code, for the performance of	or workers' compensation, issued by the D the work for which this permit is issued.	
work for which this permit is issued. M	y workers' compensation insu	rance carrier and policy number are:	•
subject to the workers' compensation	laws of California, and agree	e that, if I should become subject to the	workers' compensation laws of
Applicant Signature		Date	<u> </u>
I hereby affirm that in the performance material in violation of any City, Count applicable regulations). I will comple construction materials and maintain mi	of the work for which this perry, State or Federal regulationsy with Best Management Prinimum standards of good hou	 If asbestos is present, I will notify SCA actices to controls storm water pollution isekeeping. 	QMD accordingly and follow all
Applicant Signature		Date	
I hereby affirm under penalty of perjury	that there is a construction ler	nding agency for the performance of the wo	ork for which the permit is issued
Lender's Name		Address	
By my signature below, I certify to one I am a California licensed contra I am authorized to act on behalf I have read this construction permit ag county ordinances and state laws rela requirements for the work to be perfor purposes. I understand that application 1. Each person upon whose beh or pursuant to any permit issu agents and employees. 2. Any permit issued as a result period of one year (365 days) 3. I agree to comply with all appl 4. The issuance or granting of a provisions of any state or loc cancel the provisions of any st	of the following: ctor, or of the contractor (requires sep pplication and the information ating to building construction rmed. I authorize representar in to the Building Division for a alf this application is made an used as a result of this applicat of this application becomes in from date of issuance. licable City and County ordina permit or approval as a result al codes or ordinances. Plar state or local codes or ordinan	I have provided is correct. I agree to cor and by my signature below further indica- tives of the City to enter the property subj- permit is subject to the conditions and reside each person at whose request for whose ion agrees to and shall, indemnify and hol- ull and void if work is not commenced with unces and State Laws relating to building of of inspection shall not be construed to be a review or inspection approvals presuming ces shall not be valid. It shall be the duty	ate that I understand said code ect to this permit for inspection striction hereon and including: benefit work is performed under d harmless the City, its officers, in, or has become inactive for a construction. an approval or a violation of the g to give authority to violate or of the permit applicant to cause
	License Number Contractor Signature WORKERS' COMPENSATION WARNING: Failure to secure Worke civil fines up to (\$100,000), in addit interest, and attorney's fees. I hereby affirm under penalty of perjury I have and will maintain a certific provided by Section 3700 of the Labor Policy No. I have and will maintain workers work for which this permit is issued. M Carrier Policy I certify that, in the performance subject to the workers' compensation California, and agree that, if I should be comply with those provisions. Applicant Signature HAZARDOUS MATERIALS DE I hereby affirm that in the performance material in violation of any City, Count applicable regulations). I will comply construction materials and maintain minum Applicant Signature CONSTRUCTION LENDING At I hereby affirm under penalty of perjury (Sec. 3097 Civ. Code) YES Lender's Name PERMIT APPLICANT DECLAR By my signature below, I certify to one I am a California licensed contra I am authorized to act on behalf I have read this construction permit agrounty ordinances and state laws relarequirements for the work to be perforpurposes. I understand that application 1. Each person upon whose behor pursuant to any permit issued and employees. 2. Any permit issued as a result period of one year (365 days) 3. I agree to comply with all apple 4. The issuance or granting of a provisions of any state or locancel the provisions	Business and Professions Code, and my license is in full force and edicense Number	WORKERS' COMPENSATION DECLARATION WARNING: Failure to secure Workers' Compensation coverage is unlawful, and shall subject an emple civil fines up to (\$100,000), in addition to the cost of compensation, damages as provided for in Sec 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 D 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 C work for which this permit is issued. My workers' compensation insurance carrier and policy number are: Carrier Policy No. Expiration Date Lertify that, in the performance of the work for which this permit is issued, I shall not employ any person subject to the workers' compensation insurance earrier and policy number are: Carrier Policy No. Expiration Date Lertify that, in the performance of the work for which this permit is issued, I shall not employ any person subject to the workers' compensation provisions of Section 3700 of comply with those provisions. Applicant Signature Date HAZARDOUS MATERIALS DECLARATION I hereby affirm that in the performance of the work for which this permit is issued I shall not dispose of, or cause material in violation of any City, County, State or Federal regulations. (If asbestos is present, I will notify SCA applicable regulations). I will comply with Best Management Practices to controls storm water pollution construction materials and maintain minimum standards of good housekeeping. Applicant Signature Date CONSTRUCTION LENDING AGENCY I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the workers' compensation and the information I have provided is correct. I agree to correctly or dinances and state laws relating to building construction and

Date: _____