

City of Colusa Building Permit Application

F	or	0	ffi	cial	Use	On	l

Application Fee: \$_____ Paid: Yes _____ No ____ Date: ____

Today's Date:							
,		Parcel Number:					
		hone Number:					
Mailing Address:							
Email Address:							
Detailed Description of Work to be done							
CIRCLE ONE: Concrete/Block:	Yes No Framing: Yes	No Roofing: Yes No					
Interior Only: Ye	es No Electrical: Yes	s No Plumbing: Yes No					
		uation of Project: \$					
Commercial or Residential:							
Contractor & Architect Information							
Name of Contractor:		Phone Number:					
Mailing Address:	City	Zip					
Email Address:							
Contractors Lic. #/Class/Expiration:							
Worker's Comp Carrier:	Policy #:	Expiration:					
Name of Architect (if applicable):	THE STATE OF THE S						
Mailing Address:	11 11 11 11 11 11 11 11 11 11 11 11 11	Phone Number:					
Lic. #/Expiration:							
Print Name of Applicant	Signature of Applicant	Date Submitted					
Planning Department Use Only							
City Business Lic. #/Expiration:							
Zoning:	_	Use Allowed: Yes No					
Signature:		Developer Impact Fees Required: Yes No					
Bryan Stice		Developer impact rees kequired; res No					



CONSTRUCTION PERMIT **APPLICATION**

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. Contractor Name & Address: License Class & No	WORKER'S COMPENSATION DECLARATION I hereby affirm under penalty of perjury one of the following: 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 worker's compensation insurance carrier and policy number are: CarrierPolicy NoExpiration Date Name of AgentPolicy NoExpiration Date 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. Date Applicant 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, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 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 such projects with a contractor(s) licensed pursuant to the Contractors' State License Law).	CONSTRUCTION LENDING AGENCY DECLARATION 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 (Sec. 3097, Civ.C.). Lender's Name		
☐ I am exempt from licensure under the Contractors' State License Law for the following reason:	DECLARATION BY CONSTRUCTION PERMIT APPLICANT By my signature below, I certify to each of the following:		
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 website: http://www.leginfo.ca.gov/calaw.html.	I am () a California licensed contractor or () the property owner* or () authorized to act on the property owner's behalf**. I have read this construction permit 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 above-identified property for inspection purposes. California Licensed Contractor, Property Owner* or Authorized Agent**:		
Property Owner or Authorized Agent Signature Date	SignatureDate *requires separate verification form **requires separate authorization form		
	Tequiles separate authorization form		

IMPORTANT: APPLICATION IS HEREBY MADE TO THE BUILDING OFFICIAL FOR A PERMIT SUBJECT TO THE CONDITIONS AND RESTRICTIONS SET FORTH ON THIS APPLICATION AND THE FOLLOWING:

- Construction activity is prohibited between the hours of 7:00pm and 7:00am and on Sundays and Holidays.
- The City's approved plans and permit inspection card must remain on the job site for use by City inspection personnel. 2.
- Final inspection of the work authorized by this permit is required. A Certificate of Occupancy must be obtained prior to use and occupancy of new buildings, structures and remodeling work.

This permit/plan review expires by time limitation and becomes null and void if the work authorized by the permit is not commenced within 180 days from the date of permit issuance or if the permit is not obtained within 180 days from the date of plan submittal. This permit expires and becomes null and void if any work authorized by this permit is suspended or abandoned for 180 consecutive days or if no progressive work has been verified by a City building inspector for a period of 180 consecutive days.

CALLS FOR INSPECTION

Requests for inspection should be made at least one (1) business day in advance of the inspection by telephone at (530) 458-4740