



**UTILITY UNDERGROUNDING REQUIREMENT**

If the main electrical service equipment is relocated, replaced, and/or modified, all overhead utility service drops must be replaced with underground utility service laterals. Ref: SMC Chap 18.08

Permit Address \_\_\_\_\_  
 Assessor Parcel No. \_\_\_\_\_  
 APPLICANT Name \_\_\_\_\_  
 Choose one: Architect Engineer Designer Permit Runner Other  
 Company Name \_\_\_\_\_ License No. \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State Zip \_\_\_\_\_  
 Email \_\_\_\_\_

DATE RECEIVED: _____		PLAN CHECK NO.: _____
TYPE OF PROJECT	CLASS OF WORK	
<input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> DEMOLITION
<input type="checkbox"/> DUPLEX	<input type="checkbox"/> ADDITION	<input type="checkbox"/> RE-ROOF _____ SQ.FT.
<input type="checkbox"/> APARTMENT	<input type="checkbox"/> REMODEL/ALTERATION	<input type="checkbox"/> SIGN
<input type="checkbox"/> CONDOMINIUM	<input type="checkbox"/> REPAIR/REPLACE	<input type="checkbox"/> SITE WORK/GRADING
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> SOLAR
<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> SPA/POOL
<input type="checkbox"/> PIER, DOCK, FLOAT	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> OTHER _____
<input type="checkbox"/> OTHER	<input type="checkbox"/> ACCESSORY STRUCTURE	_____

OWNER Name \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City State Zip \_\_\_\_\_  
 Email \_\_\_\_\_

**DESCRIPTION OF WORK**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OWNER BUILDER DECLARATION**  
 I hereby affirm that I am exempt from the Contractor's License Law for the following reasons [Sec. 7031.5 Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he/she is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, or that he/she is exempt therefrom and the basis for alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subject the applicant to a civil penalty of not more than five hundred dollars (\$500).]:

I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of the completion, the owner-builder will have the burden of providing that he did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The contractor's 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 Contractor's License Law.)

I am exempt under Sec. \_\_\_\_\_, B & P.C. for this reason:  
 \_\_\_\_\_

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Will any trees be trimmed, cut or removed in order to proceed with the proposed construction?  YES  NO

**TREE REMOVAL REGULATIONS**  
 Removal of trees is regulated by SMC Chap 11.12

BUILDING COST	\$ _____
ELECTRICAL COST	\$ _____
PLUMBING COST	\$ _____
MECHANICAL COST	\$ _____
<b>TOTAL CONSTRUCTION COST</b>	<b>\$ _____</b>

**CONTRACTOR** I hereby affirm 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 a full force and effect.

State License No. \_\_\_\_\_ Class \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 City Business License No. \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City State Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_  
 Email \_\_\_\_\_

**FEES**

BUILDING PERMIT	\$ _____	CONSTRUCTION TAX	\$ _____
BUILDING PLAN CK	\$ _____	SO. MARIN FIRE FEE	\$ _____
CONSULTANT FEE	\$ _____	CA SEISMIC TAX	\$ _____
PLAN STORAGE	\$ _____	STATE SURCHARGE	\$ _____
ELECTRICAL FEE	\$ _____	PENALTY	\$ _____
PLUMBING FEE	\$ _____	FEE WAIVED	_____
MECHANICAL FEE	\$ _____	AMOUNT WAIVED	\$ _____
DEMOLITION	\$ _____	OTHER	\$ _____
ENERGY	\$ _____	<b>TOTAL DUE</b>	<b>\$ _____</b>
ZONING PERMIT	\$ _____		
ENCROACHMENT	\$ _____	OTHER RECEIPT	No. _____
GRADING	\$ _____	PLAN CK RECEIPT	No. _____
		TOTAL RECEIPT	No. _____

**WORKERS' COMPENSATION DECLARATION** 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 provided by Section 3700 of the Labor Code, for the performance of work for which this permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for this performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:  
 CARRIER \_\_\_\_\_  
 POLICY NUMBER \_\_\_\_\_  
 [This section need not be completed if permit is for one hundred dollars (\$100) or less.]

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 provision of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

**ENGINEERING & PLANNING APPROVALS**

	FILE NO.	DATE APPROVED	STAFF	
ZONING PERMIT				ZONING _____
DESIGN REVIEW				EXIST. USE _____
VARIANCE				NEW USE _____
CUP				EXIST. UNITS _____
HIST. LANDMARKS				NEW UNITS _____
ENCROACHMENT				TOTAL UNITS _____
ADMINISTRATIVE				
ZONING ADMIN.				
FLOODPLAN				
ADMIN.				
GRADING				

ZONING OFFICIAL BY \_\_\_\_\_ DATE \_\_\_\_\_

**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 PROVED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY FEES.**

Signature of Contractor \_\_\_\_\_ Date \_\_\_\_\_

ADDITIONAL REQUIREMENTS/NOTES

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of the City upon the above mentioned property for inspection purposes. An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued. [2016 California Building Code Sec. 105.3.2]

PERMIT IS VOID IF WORK HAS NOT BEGUN WITHIN 180 DAYS

PERMIT NO. \_\_\_\_\_ DATE \_\_\_\_\_

BUILDING OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

X \_\_\_\_\_  
 Signature of Contractor or Owner Builder \_\_\_\_\_ Date \_\_\_\_\_