



# BUILDING PERMIT APPLICATION

COMMUNITY DEVELOPMENT DEPARTMENT  
BUILDING DIVISION  
10890 San Pablo Ave, El Cerrito, CA 94530  
TEL: (510) 215-4360 - FAX: (510) 233-5401  
[www.el-cerrito.org](http://www.el-cerrito.org)

DATE: \_\_\_\_\_

APPL. / PERMIT #: \_\_\_\_\_

Plan Check #: \_\_\_\_\_

Received By: \_\_\_\_\_

[Please PRINT clearly and fill in all that apply]

PROJECT ADDRESS: \_\_\_\_\_ CITY/COUNTY: \_\_\_\_\_

PROPERTY OWNER

TENANT

ARCHITECT

DESIGNER

ENGINEER

NAME: \_\_\_\_\_

LICENSE / REGISTRATION #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

PHONE #: ( ) \_\_\_\_\_ FAX #: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

TENANT COMPANY NAME: \_\_\_\_\_

PHONE #: ( ) \_\_\_\_\_ FAX #: ( ) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Jurisdictions may require written approval from the owner.

PROJECT CONTACT PERSON: \_\_\_\_\_ PHONE #: ( ) \_\_\_\_\_ FAX #: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

CONTRACTOR

OWNER-BUILDER

LICENSE #: \_\_\_\_\_ LIC. CLASS(ES): \_\_\_\_\_ PHONE #: ( ) \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ FAX #: ( ) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ BUSINESS LIC #: \_\_\_\_\_

**Licensed Contractors 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. Date: \_\_\_\_\_ Contractor Signature: \_\_\_\_\_

**Owner-Builder Declaration:** I hereby affirm *under penalty of perjury* that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom 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).):

- 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 License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her 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 completion, the owner-builder will have the burden of proving that he or she 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 Professional Code: The Contractors 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 License Law.)
  - I am exempt under Sec. \_\_\_\_\_, B. & P.C. for this reason \_\_\_\_\_
- Date: \_\_\_\_\_ Owner Signature: \_\_\_\_\_

**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, as provided for by Section 3700 of the Labor Code, for the performance of the 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 the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

CARRIER: \_\_\_\_\_ POLICY NO. \_\_\_\_\_

(This section need not be completed if the 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 provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date: \_\_\_\_\_ Applicant Signature: \_\_\_\_\_

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 fees.

**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: \_\_\_\_\_ 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 COUNTY OR CITY TO ENTER UPON THE ABOVE-MENTIONED PROPERTY FOR INSPECTION PURPOSES.

Signature of Applicant/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Applicant/Agent: \_\_\_\_\_

*Please PRINT Clearly and Fill-In All That Apply*

TYPE OF CONSTRUCTION: \_\_\_\_\_ OCCUPANCY: \_\_\_\_\_ ZONE: \_\_\_\_\_ FIRE SPRINKLERS:  Yes  No  
 HAZARDOUS MATERIALS:  Yes  No EXISTING USE: \_\_\_\_\_ [  N/A ]

**PROPOSED USE:** \_\_\_\_\_

ASSESSOR'S PARCEL #: \_\_\_\_\_ MAP: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

DESCRIPTION OF WORK: *(Please fill-in and mark all that apply)*

**CONSTRUCTION VALUATION:** \$ \_\_\_\_\_

**NONRESIDENTIAL**  **RESIDENTIAL**

- New Building  Addition  Alteration  Termite/Dry Rot Repair  Demolish
- Move Building  Fire Sprinklers  Sign  Foundation Only  Chimney Demo/Rebuild
- Tenant Improvement  Swimming Pool/Spa  Fire Repair  Repair/Retrofit
- Other \_\_\_\_\_  Combination Permit (Additional Information may be required)

Description: \_\_\_\_\_

DESCRIPTION OF BUILDING: *(Please fill-in and mark all that apply)*

- Office/Bank/Professional  Single Family  Duplex  Townhouse  Condominium  Apartment Bldg.
- Hotel/Motel  Amusement/Recreation  Industrial  Service Station  Medical Bldg.
- Restaurant  Accessory Bldg.  Historic Bldg.  Educational/School
- City/County Owned  Church/Assembly  Mercantile/Store  Other: \_\_\_\_\_

BLDG. AREA: \_\_\_\_\_ sq. ft. BLDG. HEIGHT: \_\_\_\_\_ ft. **No. STORIES:** \_\_\_\_\_

**EXISTING:** Floor Area \_\_\_\_\_ Garage Area \_\_\_\_\_ Other Area \_\_\_\_\_ # Units \_\_\_\_\_

**ADDITIONAL PROPOSED:** Floor Area \_\_\_\_\_ Garage Area \_\_\_\_\_ Other Area \_\_\_\_\_ # Units \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Number of Bathrooms \_\_\_\_\_ Total Number of New Rooms \_\_\_\_\_

Lot Size (sq. ft.) \_\_\_\_\_ Lot Dimensions (Front/Side/Rear) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Lot Coverage % \_\_\_\_\_

SETBACKS: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

Easements \_\_\_\_\_ Flood Zone \_\_\_\_\_ Fire Zone \_\_\_\_\_  Sewer  Septic Water Well:  Yes  No

**PLAN CHECK:**  Yes  No *[This Section is for Office Use Only]*

**Route to Agencies Checked Below:**

- Residential Plan Check  Public Works  STEGE  Contra Costa Co. Environmental Health
- Commercial Plan Check  Fire  DebrisCompliance  BAAQMD
- Planning  Other: \_\_\_\_\_

**Check All That Apply:**

- Hazardous Materials  Energy Calcs Req'd  School Fees Req'd  Certificate of Occupancy Req'd
- Soils Report Req'd  Grading Plans Req'd  Sewer Fees Req'd  Verify Workers Compensation
- Engineer'g Calcs Req'd  Special Inspection Req'd  Planning Approval  Other: \_\_\_\_\_

**PAYMENT METHOD**

Payment for plan review and permit fees may be paid with cash, check, or credit card. Only Visa, MasterCard, Discover Card can be accepted. Over-the-Phone credit card payments will not be accepted. The credit card and proper identification must be present with the applicant to be used unless a pre-arranged credit authorization form for fax permits only is on file.

