



To apply online, visit the Customer Self-Service (CSS) Portal <https://css.cityofsanmateo.org>

## Building Permit Application Form

|                        |   |                 |  |                         |                         |
|------------------------|---|-----------------|--|-------------------------|-------------------------|
| 1                      | Project Address:  |                 | Unit #:  | Floor:                  | Project Valuation:      |
| 2                      | Project Description:  |                 |  |                         |                         |
| 3                      | Type of Project:  | Square Footage: | Project Includes:  |                         | Existing Use:           |
|                        | New Structure:  | Sq. Ft.         | <input type="checkbox"/> Electrical  |                         |                         |
|                        | Addition:   | Sq. Ft.         | <input type="checkbox"/> Mechanical  |                         |                         |
|                        | Alteration/Remodel:   | Sq. Ft.         | <input type="checkbox"/> Plumbing  |                         |                         |
|                        | Garage New:   | Sq. Ft.         | <input type="checkbox"/> Reroof - Number of squares: _____   |                         | Proposed Use:           |
|                        | Garage Alter:   | Sq. Ft.         | Roofing Material:<br>_____   |                         |                         |
|                        | Other (Misc.):  | Sq. Ft.         | <input type="checkbox"/> Hotworks Required   |                         |                         |
|                        | Demolition:   | Sq. Ft.         |  |                         |                         |
| Property Owner's Name: |   | Address:        |  | City, State & Zip Code: |                         |
| 4                      | Phone Number:   |                 | Email Address:   |                         |                         |
| 5                      | Applicant Information:  |                 | <input type="checkbox"/> Owner <input type="checkbox"/> Owner's Agent <input type="checkbox"/> Contractor <input type="checkbox"/> Contractor's Agent<br><input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Developer <input type="checkbox"/> Tenant |                         |                         |
|                        | Applicant's Name: (Primary Contact):  |                 | Address:   |                         |                         |
|                        | Company Name:   |                 | Phone Number:  |                         | Email Address:          |
| 6                      | Contractor's Company Name:  |                 | Address:   |                         | City, State & Zip Code: |
|                        | Phone Number:   |                 | Email Address:   |                         |                         |
|                        | Business License #:   |                 | Contractor's State License #:  |                         | License Class:          |
|                        | Worker's Compensation Carrier:  |                 | Policy #:  |                         | Expiration Date:        |
| 7                      | Architect's/Designer's Name:  |                 | Address:   |                         |                         |
|                        | Company Name:   |                 | Lic#:  | Phone Number:           | Email Address:          |
| 8                      | Tenant's Name:  |                 | Address:   | City & Zip Code:        | Email Address:          |
| 9                      | Permits issued shall become invalid unless the work on the site authorized by such permit is commenced within 12 months after its issuance, or if the work authorized on the site by such permit is suspended or abandoned for a period of 12 months after the time the work is commenced. The building official is authorized to grant, in writing, one or more extensions of time, for periods not more than 180 days each. The extension shall be requested in writing and justifiable cause demonstrated. (See Health and Safety Code Section 18938.5 and 18938.6. & 2022 CBC, Section 105.5.1) |                 |  |                         |                         |
|                        | Signature of Applicant:   |                 | Print Name:  |                         | Date:                   |

# WORKER'S COMPENSATION DECLARATION FOR CONTRACTORS

## (NOT REQUIRED FOR OWNER/BUILDER PERMITS)

**INSTRUCTIONS:** For online applications, please complete and upload this declaration as a PDF attachment.

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### LICENSED CONTRACTORS' DECLARATION:

I hereby affirm under penalty of perjury that I am licensed under the 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. If doing work on a residential property, I certify that I hold a valid certification as a Home Improvement Contractor per B&P Code, Section 7150.2c. The following applies to B contractors only: I understand the limitations of Section 7057 related to my ability to take prime contracts or subcontracts involving specialty trades.

Contractor's License #: \_\_\_\_\_ License Class: \_\_\_\_\_ Signature: \_\_\_\_\_

### WORKER'S COMPENSATION DECLARATION:

I hereby affirm under penalty of perjury one of the following declarations:

#### **(PLEASE ONLY CHECK ONE BOX)**

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. Policy #: \_\_\_\_\_

I have and will maintain workers' compensation insurance, as required by Section 2\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: \_\_\_\_\_

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.

Sign: \_\_\_\_\_ Date: \_\_\_\_\_  Contractor  Authorized Agent

**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.

### CONSTRUCTION LENDING AGENCY:

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, Civil Code).

Lender's Name: \_\_\_\_\_ Lender's Address: \_\_\_\_\_

### FINAL DECLARATION:

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 ordinance and slate laws relating to building construction and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

Print: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor  Authorized Agent