

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance or a certified copy thereof (Sec. 3800, Lab C).

1 Certified copy is hereby furnished.

Date _____ Applicant _____

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

Date _____ Applicant _____

NOTICE TO APPLICANT. If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

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 in full force and effect.

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051 Business and Professions Code).

Lic. or Reg. No. _____ Date _____

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ 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 (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

I hereby affirm that there is a compensation 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 all of the information is correct. I agree to comply with all city ordinances and State laws relating to building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent

Date _____

BOOK	PAGE	PARCEL

CITY OF SIERRA MADRE

BUILDING DEPARTMENT

FOR APPLICANT TO FILL IN			
SITE ADDRESS			
LOT NUMBERS		BLOCK	
TRACT NUMBER			
OWNER			
MAIL ADDRESS			
CITY		TEL. NO.	
SOIL ENGINEER		STATE REG. NO.	
MAIL ADDRESS			
CITY		TEL. NO.	
GRADING CONTRACTOR		TEL. NO.	
ADDRESS			
GEOLOGIST		TEL. NO.	
ADDRESS			
SUPERVISING ENGINEER		TEL. NO.	
ADDRESS			
PROPOSED USE OF GRADED SITE(S)			
CHECK IF SUPERVISED GRADING <input type="checkbox"/>			
SIGNATURE OF APPLICANT			
CUBIC YDS. HANDLED:	CUT	FILL	IMPORT
			EXPORT

GRADING OR DRAINAGE & LOW IMPACT DEVELOPMENT

PERMIT - APPLICATION

DISTRICT NO.	MAP NO.	STATE HWY. YES <input type="checkbox"/> NO <input type="checkbox"/>	PROCESSED BY
USE ZONE	SPECIAL CONDITIONS		
SURETY'S BOND		BOND NO.	
SURETY COMPANY			
DATE FILED	REC'D. BY		
CASH DEPOSITS	REC'D. BY		DATE FILED
THIS IS A LIMITED TIME PERMIT			
ALL WORK MUST BE COMPLETED BY			
TIME LIMIT:			
EXTENDED TO:		BY:	
EXTENDED TO:		BY:	
INITIAL GRD. PREP.	DATE	INSPECTOR'S SIGNATURE	
COMPACTION REPORT REC'D.			
SUP. ENGR'S. CERT. REC'D.			
ROUGH GRADING APPROVAL			
PLANTING AND IRRIGATION			
SUP. ENGR'S. FINAL CERT.			
FINAL APPROVAL			
SURETY BOND RELEASED			
LID BMP:			
REMARKS:			
P.C. FEE \$		Permit Fee	
		Issuance Fee	
		Total Fee	
PERMIT VALIDATION			

INSPECTOR'S COPY

VALIDATION

This is a Grading or Drainage & LID Permit When Properly Filled Out, Signed and Validated.

PERMIT VOID IF WORK IS NOT COMMENCED WITHIN 180 DAYS OF DATE OF ISSUANCE.