

Application for Grading Permit

(Must be complete, legible and accurate)

Application Date: _____

Permit Type: Commercial Residential

Desc. of work: _____

Estimated Amount of Cubic Yards of Soil being Moved: _____ cu/yd

JOB ADDRESS: _____	CITY: _____	ZIP: _____
A.P.N.: _____	LOT#: _____	VALUATION: _____

OWNER NAME: _____	PHONE: (____) _____
ADDRESS: _____	CITY: _____ ZIP: _____

CONTRACTOR: _____	PHONE: (____) _____	
ADDRESS: _____	CITY: _____ ZIP: _____	
CONTRACTOR LICENSE NO: _____	CONTRACTOR CLASS: _____	BUS LICENSE: _____

GRADING PERMIT FEES

Grading Fees \$ _____

Total Fees Collected \$ _____

Date Fees Paid _____

APPROVAL REQUIRED FROM PUBLIC WORKS DEPARTMENT	
COMMENTS _____ _____	
APPROVED BY _____	DATE _____

*Additional fees may be required. Contact the City for more information.

APPLICANT SIGNATURE

DATE

REVIEWED BY

LICENSED CONTRACTOR 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 Professionals Code and that my contractor's license is in full force and effect and that all of the information provided by me regarding this is true and correct. I also affirm under penalty of perjury that my Worker's Compensation Declaration or Certificate of Exemption from Worker's Compensation Insurance and lending agency information are true and correct.

Signed _____ Dated _____

Print Name of Signer _____

License# _____ License Class _____

WORKER'S COMPENSATION DECLARATIONS

I hereby affirm that I have a certificate of self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3000, Lab. C).

Policy# _____ Company _____

Certified copy is hereby furnished

Certified copy is filed with the building inspection department of the City of Gustine

Applicant Signature _____ Dated _____

OWNER- BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from provisions of Chapter 9, Division 3, B&D Code of the Contractor's License Law because (check applicable statement)

A. I am the owner of the above property and I will contract to have all of the work performed by licensed contractors.

B. I am the owner of the property and the work will be partially accomplished in accordance with Statement "A" and the other work will be accomplished in accordance with Statement "C".

C. I am the owner of the above property and I will perform all the above work personally or through my employees whose sole compensation will be wages, and the above described structure is not intended or offered for sale.

Applicant Signature _____ Dated _____

Print Name of Signer _____

CERTIFICATE OF EXEMPTION FROM WORKER' COMPENSATION INSURANCE

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 Worker's Compensation Laws of California.

Applicant Signature _____ Dated _____

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

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Cir. 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 CITY TO ENTER THE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

Applicant or Agent Signature _____ Dated _____