



# BUILDING PERMIT APPLICATION

CITY OF SANTEE DEVELOPMENT SERVICES DIVISION  
10601 Magnolia Ave, Santee, CA 92071  
(619) 258-4100 Ext. 154 or 155

Permit #: \_\_\_\_\_

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

Date: \_\_\_\_\_

**Project Address:** \_\_\_\_\_ **Assessor's Parcel Number:** \_\_\_\_\_

- |  |                                     |                                   |   |
|--|-------------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Commercial Tenant Improvement | <input type="checkbox"/> Electrical | <input type="checkbox"/> Demo     | <input type="checkbox"/> Residential Alteration/Remodel |
| <input type="checkbox"/> Commercial Signage            | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Re-roof  | <input type="checkbox"/> Residential Addition           |
| <input type="checkbox"/> Solar Photovoltaic            | <input type="checkbox"/> Plumbing   | <input type="checkbox"/> Pool/Spa | <input type="checkbox"/> Other: _____                   |

**Description of Proposed Work:** \_\_\_\_\_

**Project Valuation (Labor & Materials):** \_\_\_\_\_

Does this project relate to a Code Compliance Case?  YES  NO

Does the existing building have a fire sprinkler system?  YES  NO

Building Square Footage  
(Office Use Only)

**Owner Information:**

Legal Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**Contact Information:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Primary Contractor Information:**

Contractor Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

State License #: \_\_\_\_\_ License Class: \_\_\_\_\_ City Business License #: \_\_\_\_\_

**Designer Information:**

Name: \_\_\_\_\_ License #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**DEMOLITION PROJECTS:**

Will this project disturb 100 square feet or more of the existing building materials? YES \_\_\_\_\_ NO \_\_\_\_\_

**HAZARDOUS MATERIALS:** YES \_\_\_\_\_ NO \_\_\_\_\_

Indicated is the proposed use of the building or structure will involve usage of chemical or other acutely hazardous materials indicating "YES" also acknowledges that Health and Safety Code Section 25505, 25533 and 25534 as well as filing direction were made available to you.

**I certify, I have carefully examined this completed application for permit and do hereby certify, under penalty of perjury, that all information herein including any applicable attachments and declarations are correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of the jurisdiction to enter upon the property on which the work subject to this permit is to take place for inspection purposes. I also agree to save, indemnify, and keep harmless the city and its agents against all liabilities, costs, and expenses which may, in any way, accrue against them in consequence of granting of this permit.**

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

( ) Owner ( ) Contractor ( ) Agent

EXPIRATION: EVERY PERMIT ISSUED BY THE BUILDING OFFICAL UNDER THE PROVISIONS OF THIS CODE SHALL EXPIRE BY LIMITATION AND BECOME NULL AND VOID IF THE BUILDING OR WORK AUTHORIZED BY SUCH PERMIT IS NOT COMMENCED WITH 180 DAYS FROM THE DATE OF SUCH PERMIT, OR IF THE BUILDING OR WORK AUTHORIZED BY SUCH A PERMIT IS SUSPENDED OR ABANDONED AT ANY TIME AFTER THE WORK IS COMMENCED FOR A PERMIT OF 180 DAYS.

**Contractor Declarations:**

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professionals Code and my license is in full force and effect.

- I have and **will maintain a certificate of consent to self-insure for workers' compensation**, as provided 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 which the performance of the work for which this permit is issued.

**Workers' Compensation Carrier:** \_\_\_\_\_ **Policy Number:** \_\_\_\_\_

- I certify that the performance of the work for which this permit was issued, I shall not employ any person in any manner so as to become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with these provisions.

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 (\$1,000.00). IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEES.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ ( ) Owner ( ) Contractor ( ) Agent

**Owner/Builder Declarations:**

I hereby affirm under penalty of perjury that I am exempt from Contractor's License Law for the following reasons (Sec. 7031.5, Business and Professionals 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 which such permit to file a signed statement that he or she is licensed pursuant to the Contractor's License Law (Chapter 9 (Commencing with section 7000) Division 3 of the Business Professionals Code) or that her or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by an applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00).

- I as the owner of the property, or my employees with wages as their sole compensation, will do work, and the structure is not intended or offered for sale (Section 7044, Business Professionals Code: The Contractor's License Law does not apply to an owner of the property who builds or improves thereon, and who does such himself or herself of through his or her own employees, provided that such improvements are not intended or offered for sale. If, however the building or improvement will have 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 (Section 7044, Business and Professionals Code: The Contractor's License Law does not apply to an owner of the property who builds or improves thereon, and who contracts for such project with a contractor(s) licensed pursuant to the Contractors Licenses Law.)
- I am exempt under Section \_\_\_\_\_ Business and Professionals Code for this reason \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ ( ) Owner ( ) Contractor ( ) Agent

**(FOR CITY USE ONLY)**

**Planning/Zoning (619) 258-4100 Ext. 152**

Plans Reviewed By: \_\_\_\_\_

- Okay for Plan Check Only
- Approval Required Prior to Final Inspection
- Ready to Issue Building Permit: \_\_\_\_\_

**Construction & Debris (Planning Department)**

- Debris Management Plan (Part 1) Submitted
- Deposit Required: \_\_\_\_\_
- Deposit Paid: \_\_\_\_\_ Date: \_\_\_\_\_
- Exempt from Deposit: \_\_\_\_\_ Date: \_\_\_\_\_

**Engineering (619) 258-4100 Ext. 152**

Plans Reviewed By: \_\_\_\_\_

- Okay for Plan Check Only
- Grading Permit Required
- Impact Fees Required
- Impact Fees Paid: \_\_\_\_\_ Date: \_\_\_\_\_
- Approval Required Prior to Final Inspection
- Ready to Issue Building Permit: \_\_\_\_\_

**Fire Department (619) 258-4100 Ext 184**

Plans Reviewed By: \_\_\_\_\_

- Fire Fees Required
- Approval Prior to Final Inspection
- Ready to Issue Building Permit: \_\_\_\_\_

**Storm Water (619) 258-4100 Ext. 177 or 173**

Plans Reviewed By: \_\_\_\_\_

- Okay for Plan Check Only
- Asbestos Report Required
- Approval Prior to Final Inspection
- Ready to Issued Building Permit: \_\_\_\_\_

**School Fees**

- Required - Santee Elementary (619) 258-2320
- Required - Grossmont High District (619) 644-8177
- Not Applicable

**Health Department**

- Health Regulated Business DEH (858) 505-6900
- Hazardous Materials Management (858) 505-6700
- Air Pollution Control District -APCD (619) 586-2600

**Padre Dam Municipal Water District**

- Approval Received: \_\_\_\_\_
- TBD Letter Pending Approval