# FERNDALE GRADING PERMIT APPLICATION

BUILDING    PLUMBING    ELECTRICAL    MECHANICAL

| | |
|---|---|
| OWNER | PHONE |
| MAIL ADDRESS | |
| PROJECT LOCATION | |
| CONTRACTOR | PHONE |
| ARCHITECT-DESIGNER-ENGINEER-DRAFTSMAN-OWNER | |
| LENDER | BRANCH |
| LENDER ADDRESS | |
| USE OF STRUCTURE | |

| | | | |
|---|---|---|---|
| ☐ ERECT | ☐ ADDITION | ☐ RELOCATE | ☐ OCCUPANT CHG |
| ☐ ALTER | ☐ REPAIR | ☐ DEMOLISH | ☐ OTHER |

| SOURCE OF WATER | SEWAGE DISPOSAL | UTILTY OWNERSHIP |
|---|---|---|
| ☐ PRIVATE | ☐ PRIVATE | ☐ PRIVATE |
| ☐ PUBLIC | ☐ PUBLIC | ☐ PUBLIC |

DESCRIBE WORK

WORK WILL COMMENCE WITHIN ONE YEAR AFTER DATE OF ISSUANCE OF PERMIT.

IN COMPLIANCE WITH SEC. 3800, LABOR CODE, STATE OF CALIFORNIA: "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 WORKMAN'S COMPENSATION LAWS OF THE STATE OF CALIFORNIA"; OR "I AM HEREWITH FILING A CERTIFICATE OF WORKMAN'S COMPENSATION INSURANCE, ISSUED BY AN ADMITTED INSURER, OR A CERTIFICATE OF CONSENT TO SELF INSURE ISSUED BY THE DIRECTOR OF PUBLIC RELATIONS".

| | |
|---|---|
| WORKMAN'S COMP POLICY NO. | |
| SELF-INSURER CERTIFICATE NO. | |
| DATE OF EXPIRATION<br>I AM PRESENTLY A DULY LICENSED CALIFORNIA CONTRACTOR | |
| LICENSE NO.<br>OR, I AM UNLICENSED AND CLAIM EXEMPTION BY VIRTUE OF SECTIONS 7040 THROUGH 7053 OF THE BUSINESS AND PROFESSIONS CODE. | |

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL CITY AND COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION. I FURTHER AGREE TO, AND HEREBY DO GRANT TO THE BUILDING DEPARTMENT, ITS OFFICERS, EMPLOYEES, OR AGENTS, OR ANY PERSON PROPERLY DESIGNATED BY THEM, A RIGHT TO ENTER ON THE PREMISES DESCRIBED HEREINABOVE, AT ALL TIMES DURING THE LIFE OF THIS PERMIT, FOR THE PURPOSE OF MAKING SUCH INSPECTIONS AND TESTS AS MAY BE REQUIRED TO ACERTAIN FULL COMPLIANCE WITH THE LAWS OF THIS STATE AND THE ORDINANCES OF THIS COUNTY OF HUMBOLDT AND CITY OF FERNDALE.

**X** ______________________________________

SIGNATURE OF APPLICANT    DATE

I AM THE ☐ OWNER ☐ ARCHITECT ☐ ENGINEER ☐ CONTRACTOR

***APPLICANT PROVIDE ABOVE INFORMATION, AND "TOTAL VALUATION" BELOW. THE CITY WILL COMPLETE THE FORM.***

| SPECIAL APPROVALS | REQD | NOT REQD | APPROVED BY | DATE |
|---|---|---|---|---|
| PLANNING | | | | |
| HEALTH DEPT | | | | |
| PUBLIC WORKS | | | | |
| FIRE DEPT. | | | | |
| SOIL REPORT | | | | |
| | | | | |

PROJECT DESCRIPTION

| | | |
|---|---|---|
| TYPE CONST | OCCUPANCY | NO. STORIES |
| FIRE ZONE | USE ZONE | OCCUP LOAD |
| NO UNITS | NO. PKG | SPRINKLERS REQD |

EXISTING, NEW SQ. FT ______________________ AT $ ____________ = ______________

EXISTING, NEW SQ. FT ______________________ AT $ ____________ = ______________

EXISTING, NEW SQ. FT ______________________ AT $ ____________ = ______________

TOTAL VALUATION $ ______________________

| | | FEES | |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | FEES | |
| | **OTHER** | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | FEES | |
| | | | |
| | | | |
| | | | |
| | TOTAL OTHER PERMIT | | |
| | **GRADING** | FEES | |
| | GRADING PERMIT | | |
| | PLAN CHECK – CITY ENGINEER | | |
| | PLAN CHECK – CITY PLANNER | | |
| | EXCAVATION AND/OR FILL | | |
| | TOTAL GRADING PERMIT | | |
| | | | |
| | | | |
| | | | |
| | **TOTAL OF FEES** | | |

PLAN CHECK APPROVAL BY

PERMIT ISSUED BY

| | |
|---|---|
| ASSESSOR'S PARCEL NUMBER | |
| WHEN PROPERLY VALIDATED WITH RECEIPT NO. THIS IS YOUR PERMIT | |