



City of Oroville

Building Division - Community Development Department

1735 Montgomery Street
 Oroville, CA 95965-4897
 (530) 538-2401 – FAX (530) 538-2426
www.cityoforoville.org

TRAKIT#: _____

BUILDING PERMIT APPLICATION

Please keep in mind, if you are planning an improvement, you need to check with your local homeowner's association, and architectural review committee for Conditions, Covenants, & Restrictions (CC&R's). The City of Oroville has no regulatory authority to neither enforce or notify applicants of CC&R requirements nor deny permits for non-compliance. **Permit applications expire 180 days after last activity unless an extension is applied for and granted.**

JOB SITE INFORMATION & LOCATION				CONTRACTOR AND/OR AUTHORIZED AGENT INFO			
APN:				Name:			
Address:				Address:			
TYPE OF WORK				City/State/ZIP:			
<input type="checkbox"/>	Addition/Alteration	<input type="checkbox"/>	Deck/Patio	Phone:		Fax:	
<input type="checkbox"/>	Electrical/Plumbing /Mechanical*	<input type="checkbox"/>	Demolition	Email			
<input type="checkbox"/>	New Single-Family	<input type="checkbox"/>	Garage	LICENSED CONTRACTOR'S DECLARATION			
<input type="checkbox"/>	New Commercial/Commercial TI	<input type="checkbox"/>	Remodel	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 Professions Code, and my license is in full force and effect.			
<input type="checkbox"/>	Swimming Pool	<input type="checkbox"/>	Re-roof*	LICENSE NUMBER:			
<input type="checkbox"/>	Sign	<input type="checkbox"/>	Solar	CLASS:		EXPIRATION DATE:	
<input type="checkbox"/>	Other:						
Complete Description of Work:				OFFICE USE ONLY			
				PERMIT SUBMITTAL FEES			
				Building Plan Review Fee			
				Energy Plan Review Fee			
				Fire Plan Review Fee			
				Tech. Cost Recovery Submittal Fee			
TYPE OF STRUCTURE				Other			
<input type="checkbox"/>	Accessory Building	<input type="checkbox"/>	Commercial/Industrial	Sign Permit: Building Plan Review Fee			
<input type="checkbox"/>	Duplex/Multifamily	<input type="checkbox"/>	Single-Family Dwelling	Planning Sign Plan Review Fee			
<input type="checkbox"/>	Other:			Check#			Total \$
CONSTRUCTION VALUATION:				Cash	<input type="checkbox"/>	CC	<input type="checkbox"/>
Commercial/Industrial sq. ft.:				PERMIT ISSUANCE FEES			
Livable sq. ft.:				Building/Electrical/Plumbing/Mechanical			
Garage sq. ft.:				Fire Fees			
Deck/Patio sq. ft.:				Green Fee			
PROPERTY OWNER				Development Impact Fees			
Name:				Strong Motion Fee			
Address:				Tech. Cost Recovery Issuance Fee			
City/State/ZIP:				Check#			Total \$
Phone:		Fax:		Cash	<input type="checkbox"/>	CC	<input type="checkbox"/>
Email:							

*Additional paperwork to be completed prior to issuance

OWNER-BUILDER DECLARATION

I hereby affirm *under penalty of perjury* that I am exempt from the Contractors' State License Law for the following reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, shall also require the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

I, as owner of the property, or my employees with wages as their sole compensation, WILL DO ALL THE WORK or PORTIONS OF THE WORK, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved 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 Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed contractor pursuant to the Contractors' State License Law.)

I am exempt from licensure under Contractors' State License Law for the following Reason:

WORKERS' COMPENSATION DECLARATION

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 fee.

Check **ONE BOX** only: I hereby affirm *under penalty of perjury* one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by Director of Industrial Relations, as provided for by Section 3700 of the Labor Code, for performance of the work for which this permit is issued. POLICY #:

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

CARRIER: _____

POLICY#: _____

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. My signature certifies the above Workers' Compensation information is true and correct.

APPLICANT'S DECLARATION

By my signature below, I certify to each of the following:

I am;

- a California licensed contractor
- authorized agent for a California licensed contractor
- the property owner*
- authorized to act on the property owner's behalf**

I have read this permit application and the information I have provided is correct. I agree to comply with all applicable city and county ordinances and state laws relating to building construction. I authorize representatives of this city to enter upon the above-identified property for inspection purposes. I understand this permit will expire after 180 days per Chapter 1, Section 105.5 of the 2019 California Building Code. *requires separate verification form **requires separate authorization form

Authorized Representative (**Check One**): Property Owner Authorized Representative Contractor Other

Signature: _____

Permit Submittal Date: _____

Print Name: _____

Phone # _____

Email: _____