

## **Building Permits & Inspection Division**

General Information: (916) 875-5296 https://building.saccounty.gov/ 9700 Goethe Rd • Suite A Sacramento 95827 M-F 8:30am-4:00pm

827 7<sup>th</sup> St • Room 102 Sacramento 95814 M-F 8:30am-4:00pm

## **CONTRACTOR'S DECLARATION**

	Property Address:	Permit#
	Name of Property Owner:	
	Work Description:	
СО	ease complete all applicable sections in the declarations below. This declaration is mplete application, plan documents and required information have been approved illding Official.	
LI	CENSED CONTRACTOR DECLARATION	
Th Pr co Th I h	is statement may be signed by the contractor or a corporate officer of a constructive sident, Secretary, Treasurer, Trustee, Chairman of the Board, or Responsible Mantractor may sign only if the Building Inspection Division has received a letter from the person signing must list his/her title.  ereby affirm under penalty of perjury that I am licensed under provisions of Chapter vision 3 of the Business and Professions Code, and my license is in full force and	anaging Employee (RME). An agent for the the the contractor authorizing the agent to sign.  er 9 (commencing with Section 7000) of
Lic	cense No.: License Class:	
DF	ECLARATION REGARDING CONSTRUCTION LENDING AGENCY	
This section must be completed and available for public inspection during the regular business hours of the Authority. This is required so contact information is available for a claimant to give preliminary notice prior to filing a mechanics lien.  I hereby affirm under penalty of perjury that <b>THERE IS</b> a construction lending agency for the performance of the work for which this permit is issued.		
Le	nder's Name:Lender's Address:	
Lender's Name:Lender's Address:Lender's Address:  I hereby affirm under penalty of perjury that <b>THERE IS NOT</b> a construction lending agency for the performance of the work		
IOI	which this permit is issued.	
EN AI IN Th	ARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS MPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRE DITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR TEREST, AND ATTORNEY'S FEES.  is statement must be signed by the contractor, owner, tenant, lessee, or an agent NE of the following declarations:	D THOUSAND DOLLARS (\$100,000), IN IN SECTION 3706 OF THE LABOR CODE,
I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by the Labor Code, for the performance of the work for which this permit is issued.  Policy Number:		
□ 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. My workers' compensation insurance carrier and policy number are:  Carrier:Policy Number:		
Ex	piration Date:Name of Agent:	_ Phone #:
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 the applicable Labor Code(s), I shall forthwith comply with those provisions.		
<b>Under Penalty of perjury</b> , I declare that <b>I have examined this entire declaration</b> and to the best of my knowledge and belief, they are true, correct, complete and that I am the licensed contractor or authorized agent. I agree to comply with all county and state laws relating to building construction. I hereby authorize representatives of the County of Sacramento to enter upon the above-mentioned property for inspection purposes.		
۲۲	int Name: Signature: Date:	
	Licensed Contractor Authorized Agent for	Contractor

https://building.saccounty.gov/