### WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ 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 worker's compensation insurance carrier and policy number are:

CARRIER _____

POLICY NUMBER _____

☐ 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 a 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.

APPLICANT: _____ DATE: _____

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 FEES.

### LICENSED CONTRACTORS DECLARATION

I hereby affirm 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.

License Number _____ License Class _____

Contractor _____ Date _____

### OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

### 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 (Sec. 3097, Civ. 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 ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

APPLICANT: _____ DATE: _____

PERMIT NO: _____

# BUILDING PERMIT

## CITY OF INGLEWOOD

## DIVISION OF BUILDING AND SAFETY

ONE MANCHESTER BOULEVARD / INGLEWOOD, CALIFORNIA 90301

310 / 412-5294

PLAN CHECK: _____

1. Job Address _____
2. Owner _____
   Address _____
   City _____ Zip _____
   Tel. No. _____
3. Contractor _____
   Street Address _____
   City _____ State _____
   Tel. No. _____
   City License No. _____
4. Architect or Engineer _____
   Tel. No. _____
   Address _____
   City _____ Zip _____

5. DESCRIPTION OF WORK TO BE DONE

   New ___ Add ___ Alter ___ Repair ___ Demolish ___

   DESCRIBE NEW BUILDING

   Gross Area _____ No. Stories ____ Ext. Walls _____

   DESCRIBE PRESENT BUILDING

   Gross Area _____ No. Stories ____ Ext. Walls _____

   DESCRIBE ADDITION

   Gross Area _____ No. Stories ____ Ext. Walls _____

   DESCRIBE WORK

7. Valuation (including labor and material)

8. I certify that I have read this application and state that the above information is correct. I agree to comply with all city ordinances and state laws regulating building construction. I certify that in the performance of the above work for which this permit is issued I shall not employ any person in violation of the Labor Code of California relating to Workmen's Compensation.

OWNER OR CONTRACTOR _____ BY _____ AUTHORIZED AGENT

Job Address _____

Project No. _____

| GROUP | TYPE | FIRE ZONE | USE ZONE |
|---|---|---|---|
| | | | |

Plans Checked _____ Date _____

Plans Approved _____ Date _____

Permit Issued _____ Date _____

| PLAN CHECK FEE | ADD'L PLAN CHECK | PERMIT FEE |
|---|---|---|
| | | |

### INSPECTION RECORD

WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?

YES ☐ NO ☐

WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD)? SEE PERMITTING CHECKLIST FOR GUIDELINES.

YES ☐ NO ☐

I HAVE READ THE HAZARDOUS INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST. I UNDERSTAND MY REQUIREMENTS CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.

OWNER OR AGENT

| | |
|---|---|
| Plan. Div. Appv'l. | Health Dept. |
| Co. San. Dist. | School Dist. |
| Fire Sprinklers | Fire Alarm |

### APPROVALS

| | DATE | INSPECTOR |
|---|---|---|
| Foundation | | |
| Floor Joists | | |
| Sheathing | | |
| Frame | | |
| | | |
| Ext. Lath | | |
| Final | | |

JOB ADDRESS

1 INSPECTOR'S COPY