CITY OF LA PUENTE • BUILDING DEPARTMENT
15900 East Main Street La Puente, CA 91744-4788
(626) 855-1500 FAX (626) 961-4626

MISCELLANEOUS APPLICATION

1
INSPECTOR COPY

FOR APPLICANT TO FILL IN		
BUILDING ADDRESS		
CITY		ZIP
SIZE OF LOT	NO. OF BLDGS NOW ON LOT	
TRACT	BLOCK	LOT NO.
ASSESSOR MAP BOOK	PAGE	PARCEL
OWNER		TEL NO.
ADDRESS		
CITY		ZIP
APPLICATION FOR		
TRAILER USE ☐	GEOLOGY INSPECTION ☐	
OCCUPANCY INSPECTION ☐		
SAFETY PERMIT ☐ (LIST ITEMS BELOW)		
SIZE OF EXISTING BLDG.	NO. OF STORIES	
PRESENT USE OF BUILDING		
NO. OF EXISTING BUILDINGS ON LOT AND USE		
NO. PARKING SPACES PROVIDED		
PROPOSED USE OR BUILDING		
	PROPOSED MAX. OCC.	
APPLICANT (PRINT)	TEL. NO.	
ADDRESS		
PERMIT FEE		
ISSUANCE FEE		
TOTAL FEE		

BUILDING ADDRESS			
NEAREST CROSS STREET			
GROUP	TYPE CONST.		PROCESSED BY
MAP NO.	HIGHWAY (CIRCLE)	STATE SECOND	MAJOR LOCAL
USE ZONE	SPECIAL CONDITIONS		
OCCUPANCY GROUP			
OCCUPANCY LOAD			
EXIT HARDWARE NO SPEC. KNOWL. ☐ PANIC DEVICES ☐			
NO. OF EXITS			
PARKING SPACES:	REQUIRED	PROVIDED	
LIMITED TIME USE			
FROM: DATE	TO: DATE		
INSPECTOR'S SIGNATURE			
FINAL APPROVAL			

SEE REVERSE FOR EXPLANATORY LANGUAGE

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No._____ Company_____
Certified copy is hereby furnished

Certified copy is filed with the city building inspection department.

Date_____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($ 100) or less.)

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.

Date_____ Applicant _____
NOTICE TO APPLICANT: If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

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_____ Lic. Class_____

Contractor_____ Date_____

I am exempt from the Licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7C51, Business and Professions Code).

Lic or Reg. No._____ Date _____

HOME 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, will do the work and the structure is not intended or offered for sale (Section 7031.5, 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 it is issued (Section 3097, Civ. C).

Lender's Name_____

Lender's Address_____

I certify that I have read this application and state 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.

_____ _____
Signature of Permittee Date