



ISSUED PERMIT REVISIONS APPLICATION

City of Larkspur Building Department
400 Magnolia Ave.
Larkspur, CA 94939
(415) 927-5038

OFFICE USE ONLY

PERMIT NO.: _____
DATE ISSUED: _____ ISSUED BY: _____
RECEIPT NO.: _____ TOTAL: \$ _____

PROPERTY/WORK DESCRIPTION

Site Address: _____ APN: _____

Commercial: Tenant name, and Suite Number: _____

Describe how the scope of work has changed: _____

Have the revisions changed the valuation: Yes No Revised Valuation: _____

Has this project been subject to Planning approval? Yes No If yes provide Planning application number: _____

Does the revision include exterior changes? Yes No If yes, have the changes been approved by Planning?: _____

Number of revised sheets: _____ Date of revised sheets: _____ Sheet numbers: _____

Was the permit pulled as "owner-builder"? Yes No Has the contractor changed?¹ Yes No

APPLICANT: _____

CONTACT: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

EMAIL: _____

CONTRACTOR: _____

LICENSE #: _____ CLASS _____ EXP: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

EMAIL: _____

REVISIONS, DETAIL BELOW (Use additional pages or attach as necessary.) Submit three sets of plans for review:

SHEET NO.: _____ DESCRIPTION: _____

SHEET NO.: _____ DESCRIPTION: _____

SHEET NO.: _____ DESCRIPTION: _____

SHEET NO.: _____ DESCRIPTION: _____

SHEET NO.: _____ DESCRIPTION: _____

SHEET NO.: _____ DESCRIPTION: _____

APPLICANT SIGNATURE

I certify I have read this application and that the information I have provided herein is correct to the best of my knowledge. I agree to comply with all City, County, and State laws relating to building construction, and hereby authorize City Representatives to enter the project property for inspection purposes.

SIGNATURE _____ PRINT NAME _____ DATE _____

I represent the: **Owner** **Contractor** **Authorized Agent** (Please provide a signed "Agent Authorization Form" or letter)

¹If the contractor has changed fill out the second page and have contractor sign.

OWNER-BUILDER'S DECLARATION - See separate form

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 FEES.

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 the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. **POLICY #:** _____

I **have** and will maintain workers' compensation insurance, as required by Section 37400 of the Labor Code, for the performance of the work for which the permit is issued.

Carrier: _____ **Policy #:** _____ **Exp.:** _____

I **certify** that , in the performance for 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 forth with comply with those provisions.

SIGNATURE PRINT NAME DATE

CONSTRUCTION LENDING AGENCY DECLARATION

I **hereby** affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which the permit is issued (Sec. 3097, Civil Code) LENDER'S NAME AND ADDRESS: _____

LICENSED CONTRACTOR'S DECLARATION

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 Professionals Code, and my license is full force and effect.

Contractor Name: _____ License No.: _____ Class: _____ Date: _____

CONTRACTOR SIGNATURE PRINT NAME DATE

DEPARTMENT APPROVAL		DATE	PERMIT FEE	\$
BUILDING:			ELECTRICAL	\$
PLANNING:			PLUMBING	\$
PUBLIC WORKS:			MECHANICAL	\$
FIRE:			T-24 ENERGY INSULATION (NEW SF)	\$
PERMIT READY NOTIFICATION:			ACCESSIBILITY COMPLIANCE FEE	\$
			GREEN BUILDING COMPLIANCE FEE	\$
			SUBTOTAL	
COMMENTS:			PLAN CHECK	\$
			OUTSIDE PLAN CHECK	\$
			OUTSIDE PLAN CHECK ADMIN 5%	\$
			ORD. NO. 428/BEDROOMS	\$
			SMIP	\$
			PLAN RETENTION PAGES ____ SM ____ LG	\$
			PLANNING REVIEW	\$
			ENGINEERING REVIEW	\$
			FIRE REVIEW	\$
			ROAD IMPACT	\$
			GP MAINT FEE	\$
			SB 1473 REVOLVING FUND	\$
			PENALTY FEES	\$
			NON-RESIDENT CONTRACTOR	\$
			TOTAL	\$