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 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 7051 Business and Professions Code). Lic. or Reg. No. ______ Date _____ OWNER-BUILDER DECLARATION Professions Code): ☐ I, as owner of the property, or my employees with wages

I hereby affirm that I am exempt form the Contractor's License Law for the following reason (Section 7031 5, Business and

- 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 compensation 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 all of the 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.

Date

Signature	of Ap	plicant	or	Agent	

BOOK	PAGE	PARCEL

CITY OF SIERRA MADRE

BUILDING DEPARTMENT

GRADING

PERMIT - APPLICATION

FOR APPLICANT TO F	ILL IN	DISTRICTNO.	MAP NO.	STATE HWY. YES \(\Backslash \ NO \(\Backslash \)	PROCESSED BY
SITE ADDRESS		USEZONE	SPECIAL CONDITIONS		
LOT NUMBERS	DI OOK				
TRACT	BLOCK				
NUMBER		SURETY\$			OND
OWNER MAIL		BOND NO. SURETY			J
ADDRESS TEL.		DATE	REC'D	·.	
CITY NO.		FILED CASH	BY REC'D	1	DATE
SOIL STATE ENGINEER REG. N	Э.	DEPOSIT\$	BY		FILED
MAIL ADDRESS		THIS IS A LIMITED TIME PERMIT			
TEL. CITY NO.		ALL WORK MUST BE COMPLETED BY			
GRADING TEL. CONTRACTOR NO.		TIME LIMIT:			
ADDRESS		EXTENDED TO:		BY:	
TEL. GEOLOGIST NO.		EXTENDED TO:		BY:	
ADDRESS		INITIAL GRD. PREP.	DATE		R'S SIGNATURE
SUPERVISING TEL. ENGINEER NO.		COMPACTION REPORT REC'D.			
ADDRESS		SUP. ENGR'S. CERT. REC'D.			
PROPOSED USE OF GRAD	ED SITE(S)	ROUGH GRADIN APPROVAL	IG		
THE COLD GOL OF GIVE	22 0112(0)	PLANTING AND IRRIGATION			
		SUP. ENGR'S. FINAL CERT.			
		FINAL APPROVAL			
·		SURETY BOND RELEASED			
		REMARKS:			
CHECK IF SUPERVISED GRADING					
SIGNATURE OF APPLICANT		P.C. FEE\$		Permit F	ee
- A. FIGNET				Issuance	
CUBIC YDS.				Total Fee	
HANDLED: CUT FILL INP	ORT EXPORT	DE	RMIT VALIDAT		MO CASH

VALIDATION

This is a Grading Permit When Properly Filled Out, Signed and Validated.