

PERMIT APPLICANT AND AUTHORIZED AGENT DISCLOSURE AND CERTIFICATION

Date:	New Amended
Permit Application No	Job Address:
	ection with an application for a building permit (Forms 1/2, 3/8, 4/7, 6 and 8). or change in information for duration of project. Please be advised that the nsultants or afford them preferential treatment.
A. Permit Applicant Information	B. Name
I hereby certify that for the purpose of filling an app for a building or other permit with the Central Perm or completion of any from related to the San Francis Building Code, or to City and County ordinances and regulations, or to state laws and codes, I am the own lessee or the agent of the owner/lessee and am auth sign all documented connected with this application	Ication Phone No. Engineer it Bureau, Firm Name
permit. I declare under penalty of perjury that the foregoing	is true Email:
and correct. I am the permit applicant <u>and</u> I am Check box(es): The owner (B) The less Architect (D) Enginee Contractor (E) Permit Consultant/Expediter (G) Other Print Applicant Name Sign Name	vir (D) Name
B. Owner Information Name	
City State Email:	Zip submit an amended form when known. Image: Comparison of the system of th
	F. Attorney Information
C. Lessee Information	Name
Name	Phone
Phone	
Address	City State Zip
City State	Zip Email:
Email:	
D. Architect/Engineer Information	G. Permit Consultant/Expediter/Authorized Agent/Others
□ None □ List of all Architect(s)/Engineer(s) of	Name Phone on project: Address
A. Name Architect D Enginee	
Phone No Firm Name	
License # Expiration Date Firm Address	Please describe your relationship with the owner.
City State	Zip

49 South Van Ness Avenue – San Francisco CA 94103 Office (628)-652-3200 Website: <u>www.sfdbi.org</u>