

CITY AND COUNTY OF SAN FRANCISCO
DEPARTMENT OF BUILDING INSPECTION
APPLICATION FOR BUILDING PERMIT

BLDG. FORM **1/2**

FORM 1 TYPE I - II - III - IV Building

FORM 2 _____ Story TYPE V Building

APPLICATION IS HEREBY MADE FOR PERMISSION TO BUILD IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS SUBMITTED HEREWITH AND FOR THE PURPOSE SET FORTH HEREIN:

APPLICATION NUMBER

OSHA APPROVAL REQUIRED
APPROVAL NUMBER:

ADDRESS _____

_____ SIDE _____ ST. AVE.

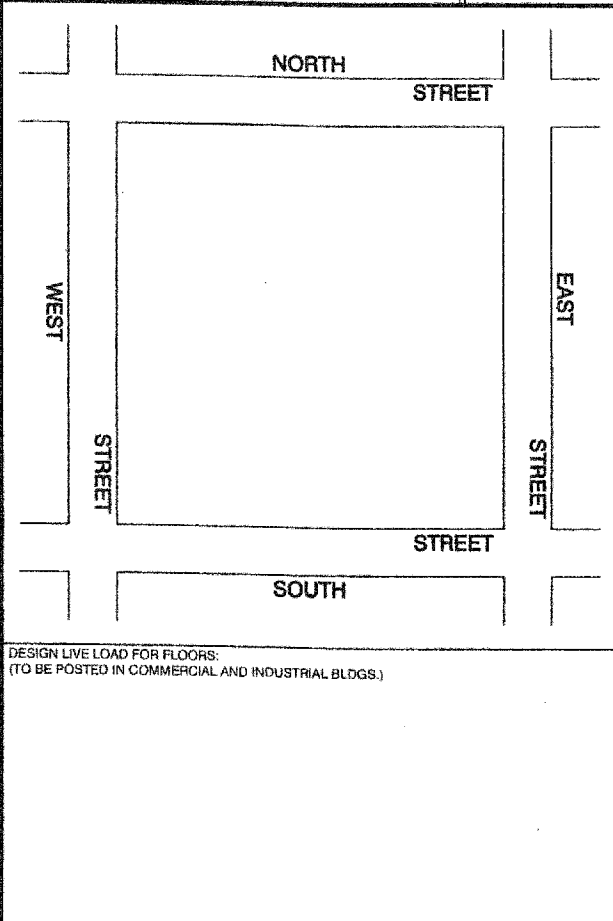
_____ FT. _____ FROM _____ ST. AVE.

NEAREST CROSS STREET _____

DATE FILED	FILING FEE RECEIPT NO.	TYPE OF CONSTRUCTION	ASSESSOR'S BLOCK & LOT NO.
PERMIT NO.	ISSUED	ESTIMATED COST	REVISED COST
		BY: _____	DATE: _____

BUILDING DESCRIPTION

SIZE OF LOT:	FRONT _____ FT.	REAR _____ FT.	AVE. DEPTH _____ FT.	IS ANY OTHER BUILDING ON LOT? YES <input type="checkbox"/> NO <input type="checkbox"/>	(IF YES, SHOW ON PLOT PLAN)
IS AUTO RUN-WAY TO BE CONSTRUCTED?	YES <input type="checkbox"/> NO <input type="checkbox"/>	USE OF BUILDING _____	BLDG. CODE OCCUP. CLASS. _____		
DOES BUILDING EXTEND BEYOND PROPERTY LINE?	YES <input type="checkbox"/> NO <input type="checkbox"/>	GROUND FLOOR AREA _____	SQ. FT. _____		
HEIGHT AT CENTER LINE OF FRONT OF BUILDING _____	WILL STREET SPACE BE USED DURING CONSTN? YES <input type="checkbox"/> NO <input type="checkbox"/>	IS BUILDING DESIGNED FOR ADDITIONAL STORIES? YES <input type="checkbox"/> NO <input type="checkbox"/>	HOW MANY? _____		
NUMBER OF DWELLING UNITS _____	NUMBER OF STORIES OF OCCUPANCY _____	NUMBER OF BASEMENTS _____	WILL SUB-SIDEWALK SPACE BE USED? YES <input type="checkbox"/> NO <input type="checkbox"/>		
GENERAL CONTRACTOR _____		ADDRESS _____			
CALIFORNIA LICENSE NUMBER _____	EXPIRATION DATE _____	TELEPHONE _____			
ARCHITECT OR ENGINEER (DESIGN) _____		ADDRESS _____			
CALIFORNIA CERTIFICATE NUMBER _____	TELEPHONE _____				
ARCHITECT OR ENGINEER (FOR CONSTRUCTION) _____		ADDRESS _____			
CALIFORNIA CERTIFICATE NUMBER _____	TELEPHONE _____				
OWNER'S NAME _____		ADDRESS _____			
B 6 A _____	TELEPHONE _____				
CONSTRUCTION LENDER (ENTER NAME AND BRANCH DESIGNATION IF ANY. IF THERE IS NO KNOWN CONSTRUCTION LENDER, ENTER "UNKNOWN")		ADDRESS _____			



IMPORTANT NOTICES

No change shall be made in the character of the occupancy or use without first obtaining a Building Permit authorizing such change. See San Francisco Building Code and San Francisco Housing Code.

No portion of building or structure or scaffolding used during construction, to be closer than 6'0" to any wire containing more than 750 volts. See Sec. 385, California Penal Code.

Pursuant to the San Francisco Building Code, the building permit shall be posted on the job. The owner is responsible for approved plans and application being kept at building site.

Grade lines as shown on drawings accompanying this application are assumed to be correct. If actual grade lines are not the same as shown revised drawings showing correct grade lines, cuts and fills together with complete details of retaining walls and wall footings required must be submitted to this department for approval.

ANY STIPULATION REQUIRED HEREIN OR BY CODE MAY BE APPEALED.

BUILDING NOT TO BE OCCUPIED UNTIL CERTIFICATE OF FINAL COMPLETION IS POSTED ON THE BUILDING OR PERMIT OF OCCUPANCY GRANTED, WHEN REQUIRED.

APPROVAL OF THIS APPLICATION DOES NOT CONSTITUTE AN APPROVAL FOR THE ELECTRICAL WIRING OR PLUMBING INSTALLATIONS. A SEPARATE PERMIT FOR THE WIRING AND PLUMBING MUST BE OBTAINED.

THIS IS NOT A BUILDING PERMIT. NO WORK SHALL BE STARTED UNTIL A BUILDING PERMIT IS ISSUED.

In dwellings all insulating materials must have a clearance of not less than two inches from all electrical wires or equipment.

CHECK APPROPRIATE BOX

- OWNER
- ARCHITECT
- ENGINEER
- LESSEE
- AGENT WITH POWER OF ATTORNEY
- CONTRACTOR
- ATTORNEY IN FACT

APPLICANT'S CERTIFICATION

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE THAT IF A PERMIT IS ISSUED FOR THE CONSTRUCTION DESCRIBED IN THIS APPLICATION, ALL THE PROVISIONS OF THE PERMIT AND ALL LAWS AND ORDINANCES THERETO WILL BE COMPLIED WITH.

NOTICE TO APPLICANT

HOLD HARMLESS CLAUSE: The permittee(s) by acceptance of the permit, agree(s) to indemnify and hold harmless the City and County of San Francisco from and against any and all claims, demands and actions for damages resulting from operations under this permit, regardless of negligence of the City and County of San Francisco, and to assume the defense of the City and County of San Francisco against all such claims, demands or actions.

In conformity with the provisions of Section 3800 of the Labor Code of the State of California, the applicant shall have coverage under (I), or (II) designated below or shall indicate item (III), or (IV), or (V), whichever is applicable. If however item (V) is checked item (IV) must be checked as well. Mark the appropriate method of compliance below:

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

- () I. I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
- () II. 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 workers' compensation insurance carrier and policy number are:
Carrier _____
Policy Number _____
- () III. The cost of the work to be done is \$100 or less.
- () IV. 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 of California. I further acknowledge that I understand that in the event that I should become subject to the workers' compensation provisions of the Labor Code of California and fail to comply forthwith with the provisions of Section 3800 of the Labor Code, that the permit herein applied for shall be deemed revoked.
- () V. I certify as the owner (or the agent for the owner) that in the performance of the work for which this permit is issued, I will employ a contractor who complies with the workers' compensation laws of California and who, prior to the commencement of any work, will file a completed copy of this form with the Central Permit Bureau.

Signature of Applicant or Agent

Date

CONDITIONS AND STIPULATIONS

REFER TO:	APPROVED: Zone _____ C.P.C. Setback _____ _____ DEPARTMENT OF CITY PLANNING	DATE: _____ REASON: _____ NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ BUREAU OF FIRE PREVENTION & PUBLIC SAFETY	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ PLAN CHECKER, DEPT. OF BLDG. INSPECTION	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ CIVIL ENGINEER, DEPT. OF BLDG. INSPECTION	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ DIRECTOR OF PUBLIC HEALTH	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ BUREAU OF ENGINEERING	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____ MECHANICAL ENGINEER, DEPT. OF BLDG. INSPECTION	NOTIFIED MR. _____ DATE: _____ REASON: _____
<input type="checkbox"/>	APPROVED: _____	NOTIFIED MR. _____ DATE: _____ REASON: _____

HOLD SECTION • NOTE DATES AND NAMES OF ALL PERSONS NOTIFIED DURING PROCESSING

I agree to comply with all conditions or stipulations of the various bureaus or departments noted on this application, and attached statements of conditions or stipulations, which are hereby made a part of this application.

Number of attachments

OWNER'S AUTHORIZED AGENT