



### LICENSED CONTRACTOR'S STATEMENT

Required documentation  Government-issued photo ID  
 Current San Francisco Business License  
 Current State California contractor's license and classification (the pocket card)

Permit Application Number \_\_\_\_\_

Permit Application Address \_\_\_\_\_

Print Company \_\_\_\_\_

Print Contractor Name \_\_\_\_\_

CSLB Number \_\_\_\_\_ Contractor Class \_\_\_\_\_ Expiration Date \_\_\_\_\_

Contractor Mailing Address \_\_\_\_\_

Contractor Telephone \_\_\_\_\_ Contractor Email \_\_\_\_\_

### 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 that: *(select one)*

\_\_\_ 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 No. \_\_\_\_\_

\_\_\_ 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 \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of Agent \_\_\_\_\_ Phone Number \_\_\_\_\_

\_\_\_ 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, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

### DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury one of the following declarations: *(select one)*

\_\_\_ I have no construction lending agency for this project.

\_\_\_ I have a construction lending agency, of the following, for the performance of the work for which this permit is issued (Section 8172, Civil Code).

Lender's Name \_\_\_\_\_ Branch Designation \_\_\_\_\_

Lender's Address \_\_\_\_\_

By my signature below, I certify to each of the following:

- I am authorized to act on the property owner's behalf.
- I have read this application and the information I have provided is correct.
- I agree to comply with the applicable city and county ordinances and state laws relating to building construction.
- I authorize representatives of this city and county to enter the above-identified property for inspection purposes.

Contractor's Signature \_\_\_\_\_ Date \_\_\_\_\_



## ASBESTOS REMOVAL DECLARATION & LEAD HAZARD WARNING

\_\_\_\_ I certify that notification of asbestos removal is either not applicable or has been submitted to the Bay Area AQMD or EPA as per section 19827.5 of the Health and Safety Code. Information is available at <https://www.baaqmd.gov/permits>. Lead safe construction practices are required when doing repairs that disturb paint in pre-1978 buildings due to the presence of lead per section 6716 and 6717 of the Labor Code. Information is available at San Francisco Public Health Department at <https://www.sfdph.org/dph/EH/CEHP/Lead/InfoContractor.asp>.

Contractor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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## AUTHORIZATION OF AGENT TO ACT ON CONTRACTOR'S BEHALF

The following information is required to be completed by the contractor only when designating an agent of the contractor to apply for a building permit for the contractor.

As the contractor listed above, I hereby authorize \_\_\_\_\_ to obtain a building permit(s), including any supplemental permits, but not limited to electrical, plumbing or temporary street-use permits, on behalf of the company/contractor listed above, with the Department of Building Inspection for the City & County of San Francisco located at 49 South Van Ness Avenue, San Francisco, California 94103.

Agent's Name \_\_\_\_\_

Agent's Address \_\_\_\_\_

Agent's Telephone \_\_\_\_\_ Agent's Email \_\_\_\_\_

Pursuant to the Business and Professions Code Sec. 7031.5, I hereby affirm, under penalty of perjury, that I am licensed under the provisions of Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, and that my license is full force and effect.

Contractor's Signature \_\_\_\_\_ Date \_\_\_\_\_

*Revised 2/13/25*