

CITY OF SUISUN CITY

701 Civic Center Blvd., Suisun City, California 94585 Office (707) 421-7310 Insp. Requests (707) 421-7319

LICENSED CONTRACTOR 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: EXP. DATE:
DATE:SIGNATURE OF CONTRACTOR:
OWNER-BUILDER DECLARATION I hereby affirm that I am exempt from the Contractor's License Law for the following reason: [] I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code). DATE: SIGNATURE OF APPLICANT:
WORKERS' COMPENSATION DECLARATION I hereby affirm that I have a certificate of Worker's Compensation Insurance or a certified copy thereof (Se. 3800, Lab. C.). INSURANCE CO: EXP. Date:
INSURANCE CO.: EXP. DATE: DATE: SIGNATURE OF APPLICANT.:
CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE 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 Workers' Compensation Laws of California. DATE: SIGNATURE OF APPLICANT: NOTICE TO APPLICANT: If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provision of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.
DIVISION OF INDUSTRIAL SAFETY PERMIT [] As owner-builder, I will not perform or employ anyone to do work which would require a permit from the Division of Industrial Safety, unless such person has a permit to do such work from the division. [] DIVISION OF INDUSTRIAL SAFETY PERMIT NO.: I certify that I have read this application and state that the above information is correct. I agree to comply with all the city and county 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.
AIR QUALITY PERMIT CERTIFICATION
 I hereby affirm that I am not installing nor modifying any equipment, which may cause air pollution. My Bay Area Air Quality Management District Authority to Construct permit number is:
HAZARDOUS MATERIALS CERTIFICATION I have read the Hazardous Materials Information Guide and understand my requirements under Chapter 6.95 of the California Health and Safety Code Sections 25505, 25533, and 25534. I understand that if the building does not currently have a tenant, it is my responsibility to notify the occupant of the requirements, which must be met prior to issuance of a Certificate of Occupancy. DATE: SIGNATURE OF APPLICANT: