



CITY OF MARYSVILLE

Community Development and Services

526 C St. Marysville, CA 95901

Phone (530) 749-3904 Fax (530)749-3991

Monday – Friday 8 a.m. – 4:30 p.m.

BUILDING PERMIT APPLICATION

Please print clearly in Ink or Type.

Date _____

Residential _____ Commercial _____

Job Value _____

Project Address _____

Project Description _____

Fire Sprinkler Yes No Unknown

Property Owner _____ Phone # (____) _____

Mailing Address _____ City _____ State _____ Zip _____

Owner Email _____

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Contractor _____ Phone # (____) _____

Mailing Address _____ City _____ State _____ Zip _____

License Type _____ License # _____ Expiration _____

Workers' Comp. Co. _____ Policy # and Exp. _____

Architect/Engineer _____ Phone #(____) _____

Occupancy Group _____ Type of Construction _____

Contact Person _____ Phone #(____) _____

Contact Person E-mail _____

I am aware that I may be subject to a re-inspection fee in the amount of \$66, per incident, if:

1. Access, together with the necessary equipment (i.e., ladder, lift, etc.) to complete the inspection, is not provided for said inspection.
2. If the job is incomplete, not ready for inspections, or requires additional inspections to make corrections and/or has not been rescheduled prior to the inspector's arrival.

APPLICANT SIGNATURE _____

Please complete the Encroachment Declaration on the reverse side of this for

PROJECT ADDRESS: _____

ENCROACHMENT DECLARATION

Will you do any of the following work with your building permit?

| | NO | YES |
|--|--------------------------|--------------------------|
| Closing an alley, street, and/or sidewalk | <input type="checkbox"/> | <input type="checkbox"/> |
| Cutting any portion of an alley, street, or sidewalk | <input type="checkbox"/> | <input type="checkbox"/> |
| Working above a public right-of-way | <input type="checkbox"/> | <input type="checkbox"/> |
| Trimming a public tree | <input type="checkbox"/> | <input type="checkbox"/> |
| Placing a debris box in a public way | <input type="checkbox"/> | <input type="checkbox"/> |
| Storage of construction equipment | <input type="checkbox"/> | <input type="checkbox"/> |
| Is the Job Value 25% or more of the property's appraised value | <input type="checkbox"/> | <input type="checkbox"/> |
| Is this a new construction | <input type="checkbox"/> | <input type="checkbox"/> |

I certify that I have read the above and I have disclosed accurate information regarding the scope of my work at the address I have listed above.

Property Owner

Date

Licensed Contractor

Date

Failure to disclose accurate information may result in a \$40.00 fine.

Submittal Checklist
(To be completed by the Building Official)

| <u>Req'd</u> | <u>Rec'd</u> | <u>Item</u> | <u>SFR</u> | <u>MFR</u> | <u>COM</u> | <u>COMMENTS</u> |
|--------------------------|--------------------------|-------------------------------------|------------|------------|------------|-----------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Completed Application Form | 1 | 1 | 1 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Owner/Bldr. Form (if applicable) | 1 | 1 | 1 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Design Review Appl. (if applicable) | | 1 | 1 | 1 |
| <input type="checkbox"/> | <input type="checkbox"/> | Building Plans/Specifications | 4 | 4 | 4 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Site Plan | 4 | 4 | 4 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Parking Lot Plan (incl. lighting) | 2 | 2 | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Roof Top Equipment Specs. | | 2 | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Landscaping Plans | 2 | 4 | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Structural Calcs. | 2 | 2 | 2 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Energy Calcs. | 2 | 2 | 2 | |
| <input type="checkbox"/> | <input type="checkbox"/> | Electrical Load Calcs. | 2 | 2 | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Truss Layout/Calcs. (roof/floor) | 2 | 2 | 2 | |
| <input type="checkbox"/> | <input type="checkbox"/> | 1/4" Scale Restroom Plan | | 4 | | |
| <input type="checkbox"/> | <input type="checkbox"/> | Special Inspection Agreement | | 1 | | |