CITY OF MONROVIA PERMITS

City of Monrovia

415 S. Ivy Avenue CA 91016
626-932-5581 Building@monroviaca.gov

PERMIT INFORMATION

JOB ADDRESS: _____

APN #: _____ **PERMIT #:** _____

PROJECT VALUATION: _____
 # DWELLING UNITS: _____
 # OF BEDROOMS: _____
SELECT PLAN CHECK CONSULTANT:
☐ Bureau Veritas ☐ VCA

HISTORIC? ☐ Yes ☐ No
HIGH FIRE ZONE? ☐ Yes ☐ No
HILLSIDE? ☐ Yes ☐ No
FIRE SPRINKLERS? ☐ Yes ☐ No

OCCUPANCY GROUP: _____
BUILDING USE: _____
CONSTRUCTION TYPE: _____

SCOPE OF WORK DESCRIPTION: _____

_____

FLOOR AREA (Sq. Ft): Living:_____ Garage:_____ Commercial:_____ Other: _____

PERMIT TYPE: ☐Building ☐Mechanical ☐Electrical ☐ Plumbing ☐ Combo ☐ Solar ☐ Battery ☐ EV Charging ☐ Demo ☐ Pool/Spa ☐ Grading (CY:_____) ☐ Other: _____

PROJECT TYPE: ☐ New ☐ Existing ☐ Addition ☐ Alteration ☐ T.I. ☐ ADU ☐ Phase 1 ☐ Phase 2 ☐ After the fact permit

CALCULATIONS PROVIDED: ☐ Structural ☐ Trusses ☐ Soils Report ☐ Energy ☐ Other: _____

CONTACT INFORMATION

LICENSED DESIGN PROFESSIONAL: _____
PHONE: _____ **LICENSE #:** _____
MAILING ADDRESS: _____ **EMAIL:** _____

CONTRACTOR: _____ **PHONE:** _____
STATE LICENSE #: _____ **CITY BUSINESS LICENSE #:** _____
MAILING ADDRESS: _____ **EMAIL:** _____

PROPERTY OWNER: _____ **PHONE:** _____
MAILING ADDRESS: _____ **EMAIL**: _____

FOR OFFICE USE ONLY

	APPROVED BY:	DATE:
Building Approval		
Planning Approval		
Fire Approval		
Public Works Approval		
In-House		
Consultant		
Los Angeles County Health Department		
Revised Valuation		

Issued By: _____

Date: _____

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LICENSED CONTRACTOR'S DECLARATION

I hereby affirm that I am licensed under provision of Chapter 9 (commencing with §7000) of Division 3 of the Business and Professions code, and my license is in full force and effect.

License Number:_____Type (B, C-10, etc.)_____
Contractor's Signature_____Date:_____

OWNER/BUILDER'S DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason: (§7031.5 Business and Professions Codes). Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance also requires the applicant for such permit to file a signed statement that he/she is licensed pursuant to the provision of the Contractor's License Law, Chapter 9 (commencing with §7000) of Division 3 of the Business and Professions Code or that he/she is exempt there from, and the basis for the alleged exemption. Any violation of §7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500.00).

_____I as owner of the property, am exclusively contracting with licensed contractors to construct the project (§7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law). I will provide evidence of such contract or otherwise identify said contractor(s) prior to issuance of the requested permit._____I am exempt under §_____of Business and Professions Code for this reason:

_____

_____

Signature:_____Date:_____

WORKER COMPENSATION DECLARATION

☐ I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof. (§3800, Labor Code)

Policy Number:_____Company:_____

Expiration:_____☐ Copy is filed with Fire Dept. ☐ Certified copy is hereby furnished

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100.00) valuation or less) 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. NOTE TO APPLICANT: If, after making this certificate of Exemption you should become subject to the Workers' Compensation provisions of the Labor Code, You must forthwith comply with such provision or this permit shall be deemed revoked.

Signature:_____Date: _____

I certify that I have read this application and state that the above information is correct and complete. I agree to comply with all city and county ordinances and state laws related to building construction and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes. I hereby assume all responsibility for ensuring the location of the property lines and/or setbacks as indicated on the approved submittals are correct; and that I will take necessary corrective actions if different from the approved submittals.

Signature:_____Date:_____

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