

WORKERS' 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 (Sec. 3800, Lab C).

Policy No. 9266920 Company State Compensation Ins Fund
 Certified copy is hereby furnished.

Date 2/16/2021 Applicant WF Construction, Inc

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) 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.

Date _____ Applicant _____
NOTICE 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 provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS 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 572359 Lic. Class A&B

Contractor WF Construction, Inc Date _____

I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051 Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031 5, Business and Professions Code):

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 (Section 7044, Business and Professions Code).

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a compensation lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name NA

Lender's Address NA

I certify that I have read this application and state that all of the information is correct. I agree to comply with all city 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.

Signature of Applicant or Agent _____ Date 2/16/2021

5767-007-027
CITY OF SIERRA MADRE
BUILDING DEPARTMENT

#209371

PLUMBING
PERMIT — APPLICATION

PLUMBER <u>WF Construction, Inc</u>			JOB ADDRESS <u>127 E Highland</u>		
ADDRESS _____			OWNER _____		
CITY _____		TEL. NO. _____	MAIL ADDRESS _____		
STATE LICENSE NO. <u>572359</u>		CITY LICENSE NO. _____	TEL. NO. _____		
PERMIT FEES		NO.	FEE	TOTAL	
WATER CLOSET (TOILET)		6			
BATH TUB		4			
SHOWER		4			
LAVATORY (WASH BASIN)		6			
SINKS: KITCHEN, FLOOR, BAR, ETC.		1			
LAUNDRY TUB OR TRAY		2			
AUTO WASHER		0			
DISH WASHER		2			
WATERING PIPING SYSTEM		0			
WATER SOFTENER*		0			
LAWN SPRINKLER*		1			
VACUUM BREAKERS, BACKFLOW VALVES (1-5)		0			
(OVER 5)					
GAS SYSTEM (1-8)		0			
(OVER 8)					
WATER HEATER		2			
URINAL		0			
DRINKING FOUNTAIN		0			
SLOP SINK		0			
SWIMMING POOL PIPING		0			
ALTERATION to WATER OR DRAINAGE PIPING					
P-TRAP FOR POOLS		0			
FIRE SPRINKLER SYS.					
MISCELLANEOUS					
PLUMBING PERMIT					
MINIMUM FEE					
TOTAL FEE				<u>1,335.00</u>	

INSPECTION RECORD		
APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER FLOOR WORK	<u>6-1-21</u>	<u>[Signature]</u>
ROUGH PLUMBING		
GAS PIPING		
GAS VENTS		
PLUMBING FIXTURES		
MISC.		
GAS TEST		
UTILITY CO. NOTIFIED		
FINAL	<u>2/22/21</u>	<u>[Signature]</u>

INSPECTOR'S COPY

Issued by [Signature] Date 3/3/2021 **VALIDATION**

This is a Plumbing Permit When Properly Filled Out, Signed and Validated.
 Permit void if work is not commenced within 60 days of date of issuance.