

COMMUNITY DEVELOPMENT DEPARTMENT

300 SEMINARY AVENUE UKIAH, CA 95482

BUILDING DIVISION

Email: buildingdivision@cityofukiah.com

Web: cityofukiah.com Phone: 707-467-5786 Fax: 707-463-6204

Inspections: 707-463-6739

BUILDING PERMIT APPLICATION

Value of Work (\$):	Assessor Parcel Number:	Use of Building:		
\$ 5,000 -	002-224-13	MOTEL		
Building Address:				
272 N. STATE ST.				
Description of Work:				
TEMPORARY S.	HORING			
Building Owner Name:	Building Owner Email:		Building Owner Phone #:	
TOM CARTER				
Building Owner Mailing Address (Street I	Number and Name, City, State, Zip Code):		Customer ID:	
Designer Name:	Designer Email:		Designer Phone #:	
RICHARD RUFF		4		
Designer Mailing Address (Street Numb	per and Name, City, State, Zip Code):		Customer ID:	
Contractor Name: MARK ZIMA	AFESCHIED Contractor Email:	7 3	Contractor Phone #:	
ZIMMERSEHIED COI	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7	
Contractor Mailing Address (Street Numl	ber and Name, City, State, Zip Code):		Customer ID:	
LICENSED CONTRACTOR'S DECLARATION: I hereby affirm under penalty of perjury that I am licensed under the 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 Class:	License Number:	105277	2	
Contractor Signature:		Date:	-5-ZY	
NINK				
OWNER BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the Contractors' State				
License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (section 7031.5, Business and Professions Code: Any City or County that requires a permit to construct, alter, improve, demolish, or repair any				
structure prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed				
pursuant to the provisions of the Contractors' State License Law (Chapter 9 (Commencing with section 7000) of Division 3 of the				
Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500),):				
I, as owner of the property or my employees with wages as their sole compensation, will do all of or				
portions of the work, and the structure is not intended or offered for sale (section 7044, Business and Professions Code: The				
Contractor's State License Law does not apply to an owner of property who, through employees' or personal effort, builds or				
improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or				
improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.).				
I, as the owner of the property, am exclusively contracting with licensed Contractors to construct the project				
(section 7044 Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who				
builds or improves thereon and who contracts for such projects with a licensed Contractor pursuant to the Contractors' State License Law).				
I am exempt from licensure under the Contractors' State License Law for the following reason:				

7044 of the Business and Professions Code, is available upon resite: http://www.leginfo.ca.gov/calaw.html .	quest when this application is submitted or at the following Web		
Signature of Property Owner or Authorized Agent:	Date: 12 -6 - 24		
WORKERS' COMPENSATION DECLARATION WARNING: FA COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDIPROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, II penalty of perjury one of the following declarations: \[\begin{align*}	OYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ITION TO THE COST OF COMPENSATION, DAMAGES AS ITEREST, AND ATTORNEY'S FEES: I hereby affirm under ure for workers' compensation, issued by the Director of Industrial		
Policy No: Have and will maintain workers' compensation insurance, performance of the work for which this permit is issued. My workers to be a second of the work for which this permit is issued.	rs' compensation insurance carrier and policy number are:		
Carrier: Policy Num STATZ FUND	ber: Expiration Date:		
Name of Agent: Pho	ne #: Verified By (City Staff):		
CERTIFICATE OF EXEMPTION FROM WORKMAN'S COMPE I certify that, in the performance of the work for which this pe to become subject to the workers' compensation laws of California compensation provisions of Section 3700 of the Labor Code, I sha	rmit is issued, I shall not employ any person in any manner so as a, an agree that, if I should become subject to the workers'		
Signature of applicant:	Date: 12-5-24		
I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code). Lender's Name:			
Lender's Address:			
By my signature below, I certify to each of the following: I am the property owner or authorized to act on the property in the property owner and the information I have pure a gree to comply with all applicable city and county ordinates.	rovided is correct. nances and state laws relating to building construction.		
Signature of Property Owner or Authorized Agent:	Date:		
Permit Expiration: This permit expires by limitation is work aut 180 days or more. An inspection is required to verify this, otherw by written request prior to expiration.			

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not be constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section

Revised 2/10/2014 Revised 10/17/2014 (email and CID) Revised 2/7/18 MK