

Application must be legible and filled out completely
CITY OF RIVERBANK BUILDING PERMIT APPLICATION
6617 Third Street - Riverbank, CA 95367 (209) 863-7128 FAX (209) 869-7126
Mailing Address – 6707 Third Street – Riverbank, CA 95367

Date of Application: _____

Work Description: _____

Job Address: _____

Cost of Proposed Project: _____ Square Footage: Living area: _____ Garage: _____

Patio/Porch: _____

OWNER INFORMATION: Name: _____ Phone No.: _____

Home Address (City-State-Zip): _____

TENANT/LEASEE: Name: _____ Phone No.: _____

Home Address (City-State-Zip): _____

BUSINESS NAME: _____

Contractor Information:

Name: _____ Phone No.: _____

Home Address (City-State-Zip): _____

Business Mailing Address: _____

Contractor's License No: _____ Class: _____ Expires: _____

Workers Compensation: Carrier _____ Policy No. _____ Expires: _____

OWNER-BUILDING VERIFICATION

Section 1.01 FOR YOUR PROTECTION YOU SHOULD KNOW THAT AS "OWNER-BUILDER" YOU ARE THE RESPONSIBLE PARTY OF SUCH BUILDING PERMIT. IF THE WORK IS BEING DONE BY SOMEONE OTHER THAN YOURSELF, YOU MAY PROTECT YOURSELF FROM POSSIBLE LIABILITY IF THAT PERSON APPLIED FOR THE PERMIT THEMSELVES. CONTRACTORS ARE REQUIRED TO BE LICENSED AND BONDED BY THE STATE OF CALIFORNIA AND TO HAVE A BUSINESS LICENSE FROM THE CITY/COUNTY IN WHICH THEY ARE WORKING. IF YOU PLAN TO DO YOUR OWN WORK WITH THE EXCEPTION OF VARIOUS TRADES YOU WILL SUB-CONTRACT, YOU SHOULD BE AWARE OF THE FOLLOWING INFORMATION FOR YOUR BENEFIT AND PROTECTION.

IF YOU EMPLOY OR ENGAGE ANY PERSON OTHER THAN YOUR IMMEDIATE FAMILY/FRIENDS AND THE WORK INCLUDING MATERIAL IF \$500.00 OR MORE FOR THE PROJECT AND SUCH PERSON IS NOT A LICENSED CONTRACTOR, THEN YOU MAY BE CLASSIFIED AS AN EMPLOYER. IF YOU ARE AN EMPLOYER YOU MUST THEN REGISTER WITH THE STATE AND FEDERAL GOVERNMENTS AS SUCH AND BECOME SUBJECT TO STATE AND FEDERAL TAX WITHHOLDING, SOCIAL SECURITY TAXES, WORKERS COMPENSATION INSURANCE, DISABILITY INSURANCE AND UNEMPLOYMENT COMPENSATION. IF YOU DO NOT CARRY OUT THESE OBLIGATIONS YOU RISK FINANCIAL LIABILITIES.

I HAVE READ THE ABOVE INFORMATION _____ YES _____ NO

I WILL PERSONALLY PROVIDE THE MAJOR LABOR/MATERIALS FOR THE ABOVE DESCRIBED PROJECT

_____ YES _____ NO OWNERS SIGNATURE _____

THIS CHECKLIST IS TO PROVIDE A GUIDE OF DOCUMENTS NEEDED TO PROCESS YOUR APPLICATION. IT IS IMPORTANT TO PROVIDE OUR DEPARTMENT ACCURATE INFORMATION IN ORDER TO PROCESS YOUR APPLICATION IN A TIMELY MANNER. IF YOU HAVE ANY QUESTION PLEASE CALL OUR OFFICE AT 863-7128 OR 863-7120 BETWEEN 8:00 A.M. TO 5:00 P.M., MONDAY THROUGH FRIDAY.

***** A complete set of plans in a digital format required before a permit is issued.**

Scaled plot plan – Show dimensions, setbacks from property lines and other structures. Show the north direction (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Scaled floor plan with details (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Foundation plan with details (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Floor framing details (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Roof framing and related details. (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”) (Must provide truss calculations and layout (2 sets)	
Construction details (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Elevations – front, side, back (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Electrical plan (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Plumbing plan (5 sets) (the 4th reduced to 11” x 17” & the 5th to 8” x 11”)	
Engineering calculations (stamped and wet signed) – 2001 UBC (2 sets)	
Heating and air condition plan and calculations (Title 24 energy calculations) (2 sets) 2005	
Copy of grant deed (if new owner)	
Public Works Dept. City of Riverbank: 2901 High St., Riverbank, CA 95367 (209) 869-7128 – Offsite Approval	
Set of plans to Fire District: 3705 Oakdale Rd., Modesto, CA 95357 (209) 552-3600 – Plan Check & Plan Check Fees 3324 Topeka St., Riverbank, CA 95367 (209) 869-7470 – Impact Fees	
Set of plans to Health Dept.: 3800 Cornicopia, Ste #C, Modesto, CA 95358 (209) 525-6700	
Building Codes: 2007 CBC; 2007 CEC; 2007 C MC; 2007 CPC; 2007 CA Energy Code	
Riverbank School District: 6717 7 th St., Riverbank, CA 95367 (209) 869-2538	
Modesto School District: 426 Locust, Modesto, CA 95367 (209) 576-4806	
For Demolition permits need letter from San Joaquin Air Pollution Control District: 4230 Kiernan Ave., Ste#130, Modesto, CA 95356 (209) 557-6400	

ASBESTO'S APPLICANT DECLARATION

To the best of my knowledge, the referenced address above does not contain asbestos. If asbestos is discovered, work will cease until evaluated by a qualified inspector. If removal of asbestos is required, the removal shall be done by a qualified asbestos removal firm.

I certify that I have read this application and state that the information supplied on the front and back of this form is correct. I agree to comply with all 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. I also understand that this permit expires by limitation 180 days from date of issuance or from the date of the last inspection (Section 105.5 CBC 2007).

DATE: _____ APPLICANT'S SIGNATURE: _____