CITY OF DANA POINT

A 1989

COMMUNITY DEVELOPMENT, BUILDING AND SAFETY 33282 Golden Lantern, Suite 209 Dana Point, CA 92629



A009-CON PROXY

2016 CALIFORNIA CODES

01/01/2017 EFFECTIVE DATE

www.danapoint.org

CONTRACTOR PERMIT PROXY

If the contractor, with or without workers compensation insurance, is not available to complete a permit application at City Hall, it may be completed and signed by the contractor and submitted by proxy. The application declarations must be completely filled out and signed by the contractor in the appropriate places. The City of Dana Point does not accept a notarized letter of authorization.

* Indicates required fields

* The carrier of the permit application must provide a legible copy of:

949 248-3594

- The contractor's driver license or other approved identification; and
- A copy of the front and back of the signed contractors' state license card; and, if applicable,
- A copy of the incorporation papers indicating the authorized person(s) and their proof of identification.

The signatures on the licenses and permit applications will be expected to match.

*Contractor Name (Please Print or type)						
*Address:		*City	*State	*Zip Code		
*Licenses #	*Class	E-Mail	*Phone Number			
*Authorized agent (Please Print)						
*Address:		*City	*State	*Zip Code		

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3907, Civ. C.).

Lender's Name:	
Lender's Address:	

*Contractor Signature

* Date

WORKERS' COMPENSATION DECLARATION

Warning: failure to secure workers' compensation coverage is unlawful, and shall subject an employer to criminal penalties and civil fines up to one hundred thousand dollars (\$100,000), in addition to the cost of compensation, damages as provided for in section 3706 of the labor code, interest, and attorney's fees.

I hereby affirm under penalty of perjury one of the following declarations:

_____ I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No. ______

_____I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier ______ Policy Number ______

Name of Agent _____

Expiration Date_____ Phone # _____

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, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

* Date

*Contractor Signature

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury 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 Class _____ License No. _____

*Contractor Signature

I certify that I have read this application and state that the above information is correct. I agree to comply with all City, and State laws relating to the building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

*Contractor Signature

* Date

*Date

IMPORTANT

Application is hereby made to the Building Official for a permit subject to the conditions and restrictions set forth on the front of this application. **1.** Each person upon whose behalf this application is made and each person at whose request and for whose benefit work is performed under or pursuant to any permit issued as a result of this application agrees to, and shall, indemnify and hold harmless the City of Dana Point, its officers, agents and employees from any liability arising out of the issuance of any permit resulting from this application. **2.** Any permit issued as a result of this application becomes null and void if work is not commenced within ONE HUNDRED EIGHTY (180) DAYS from the date of the issuance of such permit.

Directions: When completing this application via fax, you must include the copies of your approved identification, both sides of the contractors pocket card and for Corporations, your incorporation papers indicating the authorized persons unless the person completing the form is listed on the California State Contractors Licenses Board web site.

After completing the form, please fax back to (949) **248-7372**