



CITY OF SOLVANG

Community Development Department | 411 Second Street, Solvang, CA 93463 | www.cityofsolvang.com
 Phone: (805) 688-5575x218 | Inspection: (805) 805-688-5575x237 | Email buildingdept@cityofsolvang.com

BUILDING PERMIT APPLICATION

PROJECT INFORMATION			
Project Address:		APN:	
Project Description (Describe what you are applying for, and include square footage)		Valuation (labor and materials): \$	
Total Square Feet of Project (new, remodel, re-roof, etc)		Will you be working/staging in city streets or sidewalks? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Project Type		<input type="checkbox"/> Demolition <input type="checkbox"/> Solar PV* <input type="checkbox"/> Re-roof <input type="checkbox"/> Water Heater <input type="checkbox"/> Electrical Panel <input type="checkbox"/> New Construction / Addition <input type="checkbox"/> Remodel with Structural Improvements <input type="checkbox"/> Conversion / Remodel No Structural <input type="checkbox"/> Carport / Patio / Deck / Utility <input type="checkbox"/> Tenant Improvement <input type="checkbox"/> Commercial Shell <input type="checkbox"/> Sign # _____ <input type="checkbox"/> Windows # _____ <input type="checkbox"/> Other: _____	
Project Includes (check all the apply)		<input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Exterior Changes <input type="checkbox"/> Structural <input type="checkbox"/> Landscaping	
Structure Type		<input type="checkbox"/> SFR <input type="checkbox"/> MFR <input type="checkbox"/> Garage / Carport / Other <input type="checkbox"/> Commercial / Industrial <input type="checkbox"/> Mixed-Use	
Project Questions		Project is an ADU/JADU <input type="checkbox"/> No <input type="checkbox"/> Yes	
		Project replaces or creates more than 2,500 sf impervious surface <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Project is grading / fill more than 50 cubic yards <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Project adds or replaces any new landscaping <input type="checkbox"/> Yes <input type="checkbox"/> No _____ sf	
SOLAR PV SYSTEMS APPLICATIONS ONLY		Note: Calculations are required. Ensure the plans include all AC and DC calculations with system characteristics.	
		Number of Panels _____ Location of main breaker (select one): <input type="checkbox"/> Top <input type="checkbox"/> Center <input type="checkbox"/> Bottom	
		Size of System _____ kW Roof Mounted <input type="checkbox"/> Yes <input type="checkbox"/> No	
APPLICANT INFORMATION			
CHOOSE PRIMARY CONTACT: <input type="checkbox"/> Property Owner <input type="checkbox"/> Design Professional <input type="checkbox"/> Contractor			
Property Owner	Name:		Phone:
	Mailing Address:		
Design Professional	Name:		Phone:
	Mailing Address:		
Contractor	Business Name:		Phone:
	Mailing Address:		
	CA State License #:	Class(es):	Exp. Date:
	Solvang Business Certificate #		Exp. Date:

LEGAL DECLARATIONS

Owner Builder Declaration

I hereby affirm under penalty of perjury that I am exempt from the Contractor License Law for the following reason:

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

Signature: _____ Date: _____

Licensed Contractor 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 number: _____ is in full force and effect.

Signature: _____ Date: _____

Worker's Compensation Declaration

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 worker's compensation, as provided for by Section 3700 of the Labor Code for the performance of the work for which this permit is issued.
- I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

Company: _____ Policy Number _____

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

Signature: _____ Date: _____

ACKNOWLEDGEMENT

I certify that I have read this application and state the above information is correct and agree to comply with all City ordinances and State laws related to building construction and hereby authorize representatives of the City to enter upon the project site for inspection purposes. I hereby agree to save indemnify, and keep harmless the City of Solvang, its officers, and duly appointed representatives against all liabilities and judgements resulting from this permit. LOCATION OF THE STRUCTURE ON THE PROPERTY IS THE RESPONSIBILITY OF THE PERMITTEE.

Mark one of the following:

- THIS PERMIT IS BEING ISSUED TO CORRECT CODE VIOLATIONS PURSUANT TO AN ACTIVE CODE COMPLIANCE CASE AND IS VALID FOR 90 DAYS TO COMPLETE THE PROJECT. EXTENSIONS MAY BE APPROVED FOR CASES SUBJECT TO A SETTLEMENT AGREEMENT OR INVOLVE SUBSTANTIAL CONSTRUCTION REQUIRING ADDITIONAL TIME.
- THIS PERMIT EXPIRES AND BECOMES NULL AND VOID IF THE WORK IS NOT COMMENCED WITHIN 365 DAYS OF PERMIT ISSUANCE OR IF THE WORK HAS BEEN SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER INSPECTION. EXTENSIONS MAY BE APPROVED CONSISTENT WITH SECTION 105 OF THE 2022 CALIFORNIA BUILDING CODE.

Signature: _____ Date: _____

Print Name: _____

FOR OFFICIAL USE ONLY

Permit No: _____

Date Received: _____

Intake Fee: _____