



# BUILDING DIVISION PERMIT APPLICATION

## City of Grand Terrace

Business License  
(909) 954-5200

Building  
(909) 954-5181

SB County Fire  
(909) 387-4140

Planning  
(909) 954-5176

Public Works  
(909) 954-5191

### PLANNING APPROVAL

General Plan Consistency Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

Zoning Conformity Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_

Conditions Yes \_\_\_\_\_ No \_\_\_\_\_

Approved By \_\_\_\_\_

Date \_\_\_\_\_

Permit No. \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Assessor's Parcel No. (APN): \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Hm/Cell \_\_\_\_\_

**Contractor:** \_\_\_\_\_

State License #: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Wk/Cell \_\_\_\_\_

**Applicant/Agent:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Wk/Cell \_\_\_\_\_

**Architect:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Wk/Cell \_\_\_\_\_

**Engineer:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Wk/Cell \_\_\_\_\_

**Designer/Draft Person:** \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Wk/Cell \_\_\_\_\_

### Valuation of Work

☐ Building \$ \_\_\_\_\_

☐ Electrical \$ \_\_\_\_\_

☐ Plumbing \$ \_\_\_\_\_

☐ Mechanical \$ \_\_\_\_\_

**TOTAL VALUATION: \$** \_\_\_\_\_

### Description

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total Square Footage:** \_\_\_\_\_

### WHO'S DOING THE WORK!

UNDER STATE LAW, CHECK A LINE THAT APPLIES TO  
THE CONTRACTORS LICENSE LAW

\_\_\_\_\_ I am licensed under provisions of Chapter 9  
Division 3 of the Business & Profession Code.

\_\_\_\_\_ I, as the owner, or my employees with wages as  
their sole compensation, will do the work and the  
structure is not intended or offered for sale (Sec. 7044).

\_\_\_\_\_ I, as the owner, am exclusively contracting with  
licensed contractors (Sec. 7044).

\_\_\_\_\_ I am exempt under Section \_\_\_\_\_ Business  
and Professional code for this reason:

**City of Grand Terrace Business License Number**

\_\_\_\_\_

**Planning Project Number (if applicable)**

\_\_\_\_\_

### Fixture Count for New Buildings (Residential & Commercial)

Please mark the total amount of fixtures, outlets, appliances, and linear feet for the project below

<u>Electrical</u>		<u>Mechanical</u>		<u>Plumbing</u>	
<b>Services/Switchboards</b>		<b>FAU/Furnace/Boilers/Wall</b>		<b>FAU/Furnace/Boilers/Wall Heaters</b>	
( ) Service Panel	( ) Sub-Panels	<b>Heaters</b>		Plumbing Fixtures _____	
Under 400 amps	_____	Under 100,000 BTUs	_____	Dishwasher	_____
400 to 1000 amps	_____	100,001-500,000 BTUs	_____	Waste Inlets	_____
Over 1000 amps	_____	Over 500,000 BTUs	_____	Roof Drains	_____
Branch Circuits/Breakers	_____	Air Inlet/Outlet(Ducts)	_____	Backwater Valves/Devices	_____
# of Outlets/Switches	_____	<b>Air Handler/Condensers</b>		Interceptors_____ Regulators	_____
Fixtures	_____	Under 2,000 CFMs	_____	Water Heaters	_____
<b>Power Apparatus/Transformers</b>		2,001-10,000 CFMs	_____	Re-pipe _____ Outlets	_____
3-10 HP	_____	Over 10,001 CFMs	_____	Water Treat Equip (Main Line)	_____
11-50 HP	_____	Appliance Vent	_____	Grey Water Systems	_____
51-100 HP	_____	Evaporative Cooler	_____	<b>Gas Systems</b>	
Over 100 HP	_____	Ventilation Fan(s)	_____	Gas Meter	_____
Portable Generator	_____	Ventilation System(s)	_____	( ) Low Pressure ( ) Medium Pressure	
Temporary Power Pole	_____	Commercial Kitchen Hoods(s)	_____	( ) High Pressure	
Misc. Conduits (rewire L.F.)	_____	Spray Booth	_____	Gas Appliance Outlet(s)	_____
		Alter Duct System_____Ducts_____		<b>Sewer</b>	
				( ) Connection ( ) Disconnection	
				( ) Repair/Alteration	

**Disclaimer:** I certify that I have read the information on this permit application (both sides) and agree that the above information is true and correct. Any deviation from the information noted will be disclosed to the Building & Safety Division and agree to pay any additional fees that may result from changes in fixture count and/or project valuation as determined by myself, authorized representative(s), licensed contractor, design professional, or the Building Division staff.

**Print** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_