



# CITY OF BEVERLY HILLS

## Plan Review / Permit Application

SEPARATE STRUCTURES REQUIRE SEPARATE PERMITS

**\* VALUATION**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> BUILDING: * _____       | <input type="checkbox"/> ACCESSORY DWELLING: * _____     | <input type="checkbox"/> ELECTRIC VEHICLE: * _____    |
| <input type="checkbox"/> MECHANICAL: * _____     | <input type="checkbox"/> SECOND UNIT: * _____            | <input type="checkbox"/> SOLAR PANEL: * _____         |
| <input type="checkbox"/> ELECTRICAL: * _____     | <input type="checkbox"/> SOFT STORY RETROFIT: * _____    | <input type="checkbox"/> MEDICAL GAS: * _____         |
| <input type="checkbox"/> PLUMBING: * _____       | <input type="checkbox"/> ASBESTOS ABATEMENT: * _____     | <input type="checkbox"/> SANDBLASTING: * _____        |
| <input type="checkbox"/> FIRE SPRINKLER: * _____ | <input type="checkbox"/> DEMOLITION: * _____             | <input type="checkbox"/> SIGNAGE: * _____             |
| <input type="checkbox"/> FIRE ALARM: * _____     | <input type="checkbox"/> ARTIFICIAL TURF: * _____        | <input type="checkbox"/> TEMPORARY TENT: * _____      |
| <input type="checkbox"/> GRADING: * _____        | <input type="checkbox"/> FRONT YARD PAVING: * _____      | <input type="checkbox"/> TEMP. STAGE/TRUSS: * _____   |
| <input type="checkbox"/> SHORING: * _____        | <input type="checkbox"/> FENCE / WALL: * _____           | <input type="checkbox"/> ADMIN. SEISMIC INV.: * _____ |
| <input type="checkbox"/> POOL/SPA: * _____       | <input type="checkbox"/> WATER EFF. LANDSCAPING: * _____ | <input type="checkbox"/> LOW VOLTAGE: * _____         |

<b>PROJECT ADDRESS</b>			
<b>UNIT/SUITE</b>		<b>VALUATION (LABOR &amp; MATERIALS)</b>	
<b>FLOOR</b>		<b>AREA OF WORK (ESTIMATED SQ.FT.)</b>	

**▼ DESCRIPTION OF WORK ▼**


<b>APPLICANT (REQUIRED)</b>				
<b>ADDRESS</b>				
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>
<b>OFFICE PHONE</b>		<b>CELL PHONE</b>		
<b>E-PLAN ACCESS E-MAIL (REQUIRED)</b>				

<b>PROPERTY OWNER (REQUIRED)</b>				<input type="checkbox"/> <b>APPLICANT</b>
<b>ADDRESS</b>				
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>
<b>HOME PHONE</b>		<b>CELL PHONE</b>		
<b>E-MAIL (REQUIRED)</b>				

<b>CONTRACTOR</b>				<input type="checkbox"/> <b>APPLICANT (REQUIRED IF VALUATION IS \$500 +)</b>
<b>ADDRESS</b>				
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>
<b>OFFICE PHONE</b>		<b>STATE LICENSE</b>		<b>EXPIR.</b>
<b>E-MAIL (REQUIRED)</b>				

<b>ARCHITECT</b>				<input type="checkbox"/> <b>APPLICANT</b>
<b>ADDRESS</b>				
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>
<b>OFFICE PHONE</b>		<b>STATE LICENSE</b>		<b>EXPIR.</b>
<b>E-MAIL (REQUIRED)</b>				

<b>ENGINEER</b>				<input type="checkbox"/> <b>APPLICANT</b>
<b>ADDRESS</b>				
<b>CITY</b>		<b>STATE</b>		<b>ZIP</b>
<b>OFFICE PHONE</b>		<b>STATE LICENSE</b>		<b>EXPIR.</b>
<b>E-MAIL (REQUIRED)</b>				



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### MEANS & METHOD PLAN (MMP) DECLARATION

Does this structure have one or more dwelling unit(s) that is tenant-occupied?

Yes  No

If "NO", do not proceed to the next MMP question, STOP HERE, a Means and Method Plan is not required. If "YES", proceed to the next MMP question.

Will the work take more than one day?

Yes  No

If "NO", STOP HERE, a Means and Method Plan is not required. If "YES", a Means and Method Plan may be required (BHMC 9-1-108L).

Please contact the Rent Stabilization Division at [bhrent@beverlyhills.org](mailto:bhrent@beverlyhills.org) or 310-285-1031 for additional information.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### 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. \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the following reason (Sec. 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 there from 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 the work, and the structure is not intended or offered for sale (Sec. 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 does the work himself or herself or through his or her own employees, 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 he or she did not build or improve for the purpose of sale.).

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 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 the project with a contractor(s) licensed pursuant to the Contractors' State License Law.).

I am exempt under Sec. \_\_\_\_\_, Bus. and Prof. Code, for this reason: \_\_\_\_\_

Owner Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### ARCHITECT/ENGINEER DECLARATION

I am exempt from contractors' licensing laws under Sec. 7051, Bus. and Prof. Code for this reason: I am acting solely in my professional capacity.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### WORKERS' 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 workers' 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 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:

Policy No. \_\_\_\_\_ Company \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

#### CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

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.

#### CONSTRUCTION LENDING AGENCY

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 (Sec. 3097, Civ. Code).

Lender's Name and Address \_\_\_\_\_

#### ASBESTOS DECLARATION (DEMOLITION) (Health and Safety Sec. 19827.5)

Please mark the appropriate box and sign below: The building to be demolished has been surveyed and it  does  does not contain asbestos. A copy of the notification form as required by SCAQMD Rule 1403 is enclosed.

The building contained asbestos and the abatement work has been completed. A copy of the completion certificate is enclosed.

Owner or Agent Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

I certify that I have read this application and state that the above information 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 and County to enter upon the above-mentioned property for inspection purposes.

Print Name

Signature of Applicant or Agent

Date