



# COUNTY OF YOLO

Department of Community Services  
Building Inspection Division  
292 W. Beamer Street Woodland, CA 95695  
(530) 666-8775, fax (530) 666-8156 [www.yolocounty.org](http://www.yolocounty.org)

Form #  
GH - 002

## Building Permit Application

Application Date: \_\_\_\_\_ Assessor's Parcel Number: \_\_\_\_\_ Fire District: \_\_\_\_\_  
Project Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**APPLICANT** Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Main Contact:  Applicant  Owner/Tenant  Contractor  Arch/ Eng.

**OWNER**  Representative (Owner's written approval required) **PROFESSIONAL**  Engineer  Designer

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Company Name: \_\_\_\_\_  
Name: \_\_\_\_\_ CA Reg. # \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**CONTRACTOR** Name: \_\_\_\_\_ Phone: \_\_\_\_\_ License#: \_\_\_\_\_

Company Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Yolo County Business License # \_\_\_\_\_

**PROJECT INFO** Type:  Residential  Commercial/ Industrial  Remodel/ Addition  Demolition  Other  Grading

**Permit For:**  Building  Electrical  Plumbing  Mechanical  Re-roof  PV/ Solar  Water Heater  
 Patio Cover/ Deck  Swimming Pool/Spa  MH/ Commercial Coach  Ag Building  Co-location  Other \_\_\_\_\_

**Description of Work:** \_\_\_\_\_  
\_\_\_\_\_

**Proposed Use:** \_\_\_\_\_ **Existing Use:** \_\_\_\_\_

**Construction Valuation Cost (labor and material):** \$ \_\_\_\_\_

**Occupancy Group(s):** \_\_\_\_\_ **Square Footage:** \_\_\_\_\_ **Type of Construction:** \_\_\_\_\_

**Area to be disturbed by grading: Less than an acre / Or more than an acre (requires a State Permit)**

**Will any soil be imported Or exported from the site**  Yes  No

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### OFFICE USE:

**Planning Approval** Zoning: \_\_\_\_\_ General Plan: \_\_\_\_\_ Zoning Conformity: yes / no  
Zone File: \_\_\_\_\_ Inclusionary Housing Fees: yes / no  
Minimum Setbacks: FY \_\_\_\_\_ SY \_\_\_\_\_ RY \_\_\_\_\_ Conditions: yes / no  
Water Efficient Landscape Ord.: yes / no Notes: \_\_\_\_\_  
Planner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Flood Zone:** \_\_\_\_\_ **Panel Number:** \_\_\_\_\_ **Soils:** \_\_\_\_\_ **Fire Severity:** \_\_\_\_\_



# County of Yolo

## DEPARTMENT OF COMMUNITY SERVICES

Taro Echiburú, AICP  
DIRECTOR

**Planning & Public Works**  
292 West Beamer Street  
Woodland, CA 95695-2598  
(530) 666-8775  
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**Environmental Health**  
137 N. Cottonwood St, Site 2400  
Woodland, CA 95695  
(530) 666-8646  
FAX (530) 669-1448

**Integrated Waste Management**  
44090 CR 28H  
Woodland, CA 95776  
(530) 666-8852  
FAX (530) 666-8853

### Permit Instructions for Building Permit Application (GH-002)

California State Law requires that every permit applicant provide specific information and declarations regarding the proposed work. Please read the information below and follow the directions pertaining to your particular permit application. All applications must include the information requested. If you are unsure about any item, the Building Division will assist you. Fill in ALL information completely and either type or print legibly in blue or black ink. Applications may be submitted directly to the Building Division located at 292 West Beamer Street, Woodland, CA 95695.

#### Identify the Project

- Project Location: Accurate property identification is very important. Please provide the property location: APN, street address, lot, building, suite number etc. relevant to the project site address. Please note that addresses for new building construction will be issued by Yolo County Building Division.
- Applicant Information: Please complete this section according to who is applying for a permit.
- Owner Information: Please complete this section with the property owner's information.
- Contractor Information: Please provide a current main point of contact for this section.

#### Identify Permit Holder of Record

The permit holder of record can only be either the *licensed contractor of record* or the *property owner (owner-builder)*. The person signing the permit application must either be the contractor, property owner (requires separate verification form), or an authorized agent of the permit holder (requires separate authorization form).

#### Identify who will perform the Work

**Owner-Builder Declaration:** This section should only be completed if the permit holder is the property owner (owner-builder). This statement may be signed by the property owner or an authorized agent for the property owner (*requires separate authorization form*). In every case, a separate Owner-Builder Form (Acknowledgement, Verification & Authorization) must also be completed and signed by the property owner.

OR

**California Licensed Contractor's Declaration:** This section should only be completed if the permit holder is a licensed contractor. This statement may be signed by the contractor or an authorized agent for the contractor providing that the Building Division has a letter on file from the contractor authorizing the agent to sign.

#### Identify Worker's Compensation Coverage

This section should be completed for all projects. Please complete this section indicating whether the permit holder has worker's compensation insurance or is exempt from worker's compensation insurance. If using Owner-Builder please provide a valid Certificate of Consent to Self-Insure to the Building Division before the time of permit issuance; this certificate must include the policy number. If using a Licensed Contractor, please provide a valid Certificate of Worker's Compensation Insurance to the Building Division before the time of permit issuance. This certificate must show the insurance agent's name and phone number, worker's compensation carrier, policy number and expiration date. If exempt, the property owner or contractor will have no employees on the job in which this declaration must be signed either by the permit holder or an authorized agent.

THIS APPLICATION IS NOT A PERMIT. ALL VALID PERMITS RESULT WHEN PART II IS APPROVED AND ISSUED BY THE YOLO COUNTY BUILDING DIVISION. PERMIT FEES MUST BE PAID AND RECEIPT ACKNOWLEDGED. AN APPLICATION IS DEEMED ABANDONED 180 DAYS AFTER FILING UNLESS THE BUILDING OFFICIAL DETERMINES THE APPLICATION HAS BEEN PURSUED IN GOOD FAITH OR GRANTS AN EXTENSION(S). (CBC APPENDIX CHAPTER 1 SECTION 105.3.2)