

EVT17-02034

Application is hereby made to the Permit & Resource Management Department for a permit to construct or repair a sewage disposal system as described below in compliance with code of Sonoma County or for clearance for other construction.

This permit application must be signed on pertinent signature lines by the same person (i.e., contractor or owner/builder.) A letter of authorization from the owner must accompany this application if an agent is signing on the owner's behalf.

TANK

ONLY

APPLICANT: PLEASE PRESS HARD (USE BLACK INK).  
FILL IN BETWEEN HEAVY LINES ONLY.  
SEE BACK SIDE FOR TERMS OF PERMIT

Building PERMIT #

SEP PERMIT #

EXISTING USE(S) ON SITE:

Sep19-0070

JOB ADDRESS 2300 MARKWEST SPRINGS RD.

NEAREST CROSS STREET

ASSESSOR'S PARCEL No. 079-110-009

SUBDIVISION LOT LOT

CITY SANTA ROSA ZIP 95401

SEWAGE DISPOSAL SYSTEM CONTRACTOR ALL STARS SEPTIC PUMPING

ADDRESS 437 WEST 9TH PHONE No.

GENERAL CONTRACTOR HAGER GENERAL ENGINEERING

OWNER'S NAME

MAILING ADDRESS

CITY STATE ZIP

PHONE ( )

INSTALLATION WILL SERVE: ☐ EXISTING RESIDENCE ☐ NEW RESIDENCE

☒ REPLACEMENT RESIDENCE ☐ SECOND UNIT ☐ COMMERCIAL ☐ REPAIR

☐ OTHER: ☐ ATTACHED CONDITIONAL STATEMENT

TOTAL (Existing + Proposed)

Number of Units: Total No. of Bedrooms:

Water Supply:

☒ Public  
☐ Private

Lot Size:

#### OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom 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 License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such 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 License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

☐ I am exempt under Sec. B & P.C. for this reason

Date Owner

#### 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.

HAGER GENERAL  
Contractor

1016578  
License Number

A  
License Class  
7/31/20  
Expiration Date

A SEPTIC PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE OF ISSUANCE UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT.

THIS PERMIT IS LIMITED TO DAYS.

Violation #

CODE ENFORCEMENT 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. My worker's compensation insurance carrier and policy number are:

Carrier STATE COMPENSATION  
Policy No. 9238494  
(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

☐ 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.

9/20/19 Exp. Date  
Applicant Signature

**WARNING:** FAILURE TO SECURE WORKER'S 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 certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State laws relating to building construction. I hereby authorize representatives of the County of Sonoma to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.

Layout Plan Approved by:

Date 2/1/19

Construction and Permit Finaled by:

Date

☐ Contractor  
☐ Owner  
☐ Other Licensed Professional

SIGNATURE OF APPLICANT  
1228 YUBA DR. SANTA ROSA  
Address City ZIP 95407

WHEN APPROVED THIS IS YOUR PERMIT



- 05/13/5

Exp. Date 9/59

45142

150

ASTU 85

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contribution to the overall health of the community.