

City of San Diego **Development Services** 1222 First Ave., MS-302 San Diego, CA 92101 (619) 446-5000

FORM General DS-3032 Application August 2013

1. Approval Type: Separate electrica or duplexes Electrical/Plumbing	/Mechanical 🖵 Sign 🕻	Structure 🖵	Grading 🖵 Public I	Right-of-V	Wav: 🖵 Subdivision 🖵 Demo-			
lition/Removal Development Approval Vesting Tentative Map Tentative Map Map Wai Project Address/Location: Include Building or Suite No. Project Title:			_	Project No.: For City Use Only				
	1000 Roselle Street/111000 Flintkote Avenue Sorrento Valley Channel Mainte		inten					
Legal Description: (Lot, Block, Subdivision Name & Map Number) N/A					Assessor's Parcel Number:			
Existing Use: 🗋 House/Duplex 🛄	Condominium/Apartme	nt/Townhouse	Commercial/Non-	Resident	ial 🗾 Vacant Land			
Proposed Use: 🔲 House/Duplex 🗋 Condominium/Apartment/Townhouse 📋 Commercial/Non-Residential 🗹 Vacant Land								
Project Description: Routine maintenance of the Soledad Creek/Sorrento Valley Channels (Maps 9, 11, & 12; Reaches 3 & 7) through the removal of trash, sediment, and vegetation in conformance with the City's Storm Water Master Maintenance Program and SDP No. 1134892								
3. Property Owner/Lessee Tenant N City of San Diego and County of Sa		Wner 🛄 Lesse	ee or Tenant Te	elephone	: Fax:			
Address:	City:	State:	Zip Code:	E-m	ail Address:			
4. Permit Holder Name - This is the property owner, person, or entity that is granted authority by the property owner to be responsible for scheduling inspections, receiving notices of failed inspections, permit expirations or revocation hearings, and who has the right to cancel the approval (in addition to the property owner). SDMC Section 113.0103.								
Name: Gene Matter, Assistant Deputy Dire	ector T&SWD		elephone: 9) 527-7506		Fax:			
Address:	City:	State:	Zip Code:	E-ma	ail Address:			
2781 Caminito Chollas, MS 44	San Diego	CA	92105	RMatte	r@sandiego.gov			
5. Licensed Design Professional (in Name: N/A	required): (check one)		Engineer Li elephone:	icense No				
Address:	City:	State:	Zip Code:	E-ma	ail Address:			
4. Permit Holder Name - This is the property owner, person, or entity that is granted authority by the property owner to be responsible for scheduling inspections, receiving notices of failed inspections, permit expirations or revocation hearings, and who has the right to cancel the approval (in addition to the property owner). SDMC Section 113.0103. Name: Telephone: Fax: Gene Matter, Assistant Deputy Director T&SWD (619) 527-7506 Address: City: State: Zip Code: E-mail Address: 2781 Caminito Chollas, MS 44 San Diego CA 92105 RMatter@sandiego.gov 5. Licensed Design Professional (if required): (check one) Architect Engineer License No.:								
7. Notice of Violation - If you have r	eceived a Notice of Viola	ation, Civil Pena	Ity Notice and Orde	r, or Stipu	ulated Judgment, a copy must l			
provided at the time of project subm								
8. Applicant Name: Check one 🖵 Pr	coperty Owner 🗹 Auth		Property Owner 🛄 elephone:		rson per M.C. Section 112.0102 ^{Pax:}			
Gene Matter, Assistant Deputy Dire	ctor		9) 527-7506					
Address:	City:	State:	Zip Code:	E-ma	ail Address:			
2781 Caminito Chollas, MS 44	San Diego	CA	92105	RMatt	er@sandiego.gov			
Applicant's Signature: I certify that I have read this application and state that the above information is correct, and that I am the property owner, authorized agent of the property owner, or other person having a legal right, interest, or entitlement to the use of the property that is the subject of this application (<u>Municipal Code Section 112.0102</u>). I understand that the applicant is responsible for knowing and complying with the governing policies and regulations applicable to the proposed development or permit. The City is not liable for any damages or loss resulting from the actual or alleged failure to inform the applicant of any applicable laws or regulations, including before or during final inspections. City approval of a permit application, including all related plans and documents, is not a grant of approval to violate any applicable policy or regulation, nor does it constitute a waiver by the City to pursue any remedy, which may be available to enforce and correct violations of the applicable policies and regulations. I authorize representatives of the city to enter the above-identified property for inspection purposes. I have the authority and grant City staff and advisory bodies the right to make copies of any plans or reports submitted for review and permit processing for the duration of this project. Signature: Matter G. Matter G. Matter Date:								
	/cled paper. Visit our web			nt-servic				

Upon request, this information is available in alternative formats for persons with disabilities.

Pa	Page 2 of 2 City of San Diego • Development Services Department • General Application									
P	roject Address/Location: Include Building o	or Suite No.		Project No. For City Use Only						
	9. Contractor Name:		Telephone:	Fax:						
	Address:	City: Sta	te: Zip Code	e: E-mail Address:						
	State License No.:	License Class:	City Busin	ess Tax No.: (required per SDMC Section 31.0301)						
way	* Licensed Contractor's Declaration: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (com- mencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.									
of-	Print Name:		Γ	Date:						
light-	Contractor Signature or authorized agent:									
Ц С	10. * Workers' Compensation Declaration: I hereby affirm under penalty of perjury one of the following declarations:									
except Grading and Public Right-of-way	WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EM- PLOYER 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.									
an	I hereby affirm under penalty of perjur	, O								
ng	a. I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.									
Grad	b . 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:									
ot C	Insurance Carrier:	Pol	icy No.:	Expiration Date:						
(cel	Name of Agent:	Pho	one No.:							
Permits, e)	 c. 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 t 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. 									
Per	Print Name:		Γ	Date:						
2	Contractor, owner, or authorized agent sign	nature:								
(Must be completed for all Constru										
e comp	b. I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and contracts for such projects with contractor(s) licensed pursuant to the Contractor's License Law).									
	and rules and to be site in a variable upon request when this appreation is submitted of at the following web site. <u>Inter/www.leginto.</u>									
Part II	Print Name:		Γ	Date:						
	Owner Signature or authorized agent:									
	A separate Owner-Builder Verification form (DS-3042) must also be signed by the owner.									
	 A separate Owner-Batter Vertication form (<u>DS-5042</u>) must also be signed by the owner. 12.Construction Lending Agency: I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C). 									
	Lender's Name:		Lender's A	ddress:						
-	* Required per California State Law, Healt									