



Change of Building Permit Record

Complete the appropriate section below when there is a change of record **AFTER** issuance of a Building Permit. See <u>Information Bulletin 250</u> for more information.

| 1. Type of Request (Select all that apply): | | | | |
|---|--|-------------------------|----------------------------|--|
| □ Change of Owner (complete sections 2 and 3) □ Change of Contractor (complete sections 2, 4, 6, and 8) □ Change of Permit Holder (complete sections 2 and 7) | ☐ Change to Owner-Builder (complete sections 2, 8, and 9) ☐ Change of Licensed Design Professional (complete sections 2, 4, and 5) | | | |
| 2. Existing Project | | | | |
| Address (including building or Suite No.): | Pr | oject No.: | Approval No.: | |
| 3. New Property Owner | | | | |
| Name: | Phone: | Email Address: | | |
| Address: | City: | State: | Zip Code: | |
| Declaration: By submitting this change of record I certify that I proposed. I assume full responsibility for satisfactory completion assuming ownership, and agree to assume full responsibility for | n of all work authorized under the | e permit, including wo | ork performed prior to | |
| Signature: | Date: | | | |
| 4. Change of Contractor/Licensed Design Profession | onal | | | |
| Must be completed by (<i>check one</i>): Property Owner | ☐ Authorized Agent of Property | y Owner | it Holder | |
| Effective date: , the Licensed Design Procession contractor and/or Licensed Design Profession | ofessional (<i>listed in item 5</i>) and/o nal. | r Contractor (listed ir | n item 6) shall be the new | |
| Name: | Signature: | | | |
| 5. Licensed Design Professional (if required, check one): | : ☐ Architect ☐ Engineer | License No | o.: | |
| Name: | Phone: | Email Address: | | |
| Address: | City: | State: | Zip Code: | |
| Declaration: I assume all of the responsibilities and obligations record prepared and will submit alternate plans/reports for any subsequent to the date of hire. | · | • | 9 | |
| Print Name: | Date: | | | |
| Licensed Design Professional Signature: | | | | |
| 6. New Contractor Information | | | | |
| Name: | Phone: | Email Address: | | |
| Address: | City: | State: | Zip Code: | |
| State License No.: License Class: | | | | |
| Licensed Contractor's Declaration: I hereby affirm under pend section 7000) of Division 3 of the Business and Professions Code | | | napter 9 (commencing with | |
| Print Name: | Date: | | | |
| | | | | |

Contractor Signature or authorized agent:

| for scheduling inspections, receiving notices of failed inspect cancel the approval (in addition to the property owner). <u>SDM</u> | ions, permit expirations or rev | | • | |
|---|---|---|--|--|
| Name: | Phone: | Email Addre | Email Address | |
| Address: | City: | State: | Zip Code: | |
| 8. Workers' Compensation Declaration: 1 hereby affire | m under penalty of perjury one | of the following declarati | ons: | |
| WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERA FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADD OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES. | | | | |
| A. I have and will maintain a certificate of consent to se Relations as provided for by Section 3700 of the Lab B. I have and will maintain workers' compensation insu the work for which this permit is issued. My workers | or Code, for the performance rance, as required by Section | of the work for which th 3700 of the Labor Code | is permit is issued. , for the performance of | |
| Insurance Carrier: | Policy No.: | Expiration D | ate: | |
| Name of Agent: | Phone: | | | |
| C. I certify that, in the performance of the work for which be-come subject to the workers' compensation laws compensation provisions of Section 3700 of the Laboratory. | of California, and agree that, i | f I should become subje | ect to the workers' | |
| A separate Owner-Builder Verification form (DS-3042) mu | ıst also be signed by the owr | ner. | | |
| 9. Change to Owner-Builder: Effective Date: | | | | |
| Owner-Builder Declaration: I hereby affirm under penalty of point indicated below by the checkmark(s) I have placed next to the appropriate to the appropriate to file a signed statement that he or she is licensed put commencing with Section 7000 of Division 3 of the Business and alleged exemption. Any violation of Section 7031.5 by any application and dollars (\$500). | oplicable item(s). (Section 7031.5 lish, or repair any structure, pric ursuant to the provisions of the Professions Code) or that he or | 5, Business and Profession or to its issuance, also rec Contractor's State License she is exempt from licen | ns Code: Any city or quires the applicant for Law (Chapter 9 sure and the basis for the | |
| A. I, as owner of the property, or my employees with we and the structure is not intended or offered for sale Law does not apply to an owner of property who, the provided that the improvements are not intended or year of completion, the Owner-Builder will have the B. I, as owner of the property, am exclusively contracting Professions Code: The Contractor's License Law does contracts for such projects with contractor(s) license C. I am exempt from licensure under the Contractors' S | (Section 7044, Business and P rough employees' or personal r offered for sale. If, however, burden of proving that it was ng with licensed contractors to s not apply to an owner of pro d pursuant to the Contractor's | rofessions Code: The Co effort, builds or improve the building or improve not built or improved fo construct the project (S perty who builds or imp s License Law). | ontractors' State License es the property, ment is sold within one r the purpose of sale). Sec. 7044, Business and | |
| By my signature below I acknowledge that, except for my person of the improvements covered by this permit, I cannot legally sell its entirety by licensed contractors. I understand that a copy of the upon request when this application is submitted or at the follow | a structure that I have built as o he applicable law, Section 7044 | an owner-builder if it has of the Business and Prof | not been constructed in | |
| Print Name: | Date: | | | |
| Owner Signature or Authorized Agent: | | | | |