



# City of McFarland

401 W Kern Ave  
 McFarland CA 93250  
 Office: (661)792-3091  
 Fax: (661)792-3093

<b>Application Number:</b>
<b>Date:</b>
<b>Square Footage:</b>
<b>Valuation</b>

## BUILDING PERMIT APPLICATION

**INCOMPLETE FORMS CANNOT BE PROCESSED**  
**PLAN CHECK DEPOSIT MUST BE PAID**

<b>PROJECT ADDRESS:</b>
<b>PARCEL NUMBER:</b>

<b>APPLICANTS NAME:</b>	
ADDRESS:	
CITY:	STATE:
ZIP:	PHONE:
EMAIL:	
<b>CONTRACTOR NAME:</b>	
ADDRESS:	
CITY:	STATE:
ZIP:	PHONE:
CA LICENSE:	EXPIRATION DATE:
EMAIL:	
<b>OWNER NAME:</b>	
ADDRESS:	
CITY:	STATE:
ZIP:	PHONE:
Email:	
<b>Description of Work:</b>	

<b>TYPE OF PERMIT:</b>	
NEW RESIDENTIAL	ALTERATIONS
RESIDENTIAL REMODEL	MECHANICAL
MASTER RESIDENTIAL	DEMOLITION
SINGLE FAMILY HOUSE	PATIO/PORCH
HOUSE MOVING	ELECTRICAL
TEMPORARY GAS	PLUMBING
CODE COMPLIANCE	RE-ROOF
SEWER CONNECTION	CARPORT
SWIMMING POOL	OTHER

**\*ATTENTION\***

Master site plans must be EXACTLY the same as the "Approved" set, or the site plans will result in a regular plan check process and will include a standard plan check fee

**Note:**

The contractor is required to have a valid City of McFarland Business License, current copies of their Certificate of General & Auto Liability Insurance and Worker's Compensation on file with the City of McFarland Finance Division prior to issuance of all permits.

<p><input type="checkbox"/> <b>OWNER BUILDER</b></p> <p>We are providing you with a PROPERTY OWNERS PACKET that includes an <i>Owner-Builder Acknowledgement and Information Verification Form</i> to make you aware of your responsibilities and possible risk you may incur by having permit in your name as the Owner-Builder.</p> <p><b>We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned</b> to the Owner-Building Verification Form to the City of McFarland. An agent of the owner cannot execute this notice unless you, the property owner, obtained the prior approval of the permitting authority.</p> <p>I have received and completed the Owner-Builder Acknowledgment and Information Forms.          Date: _____</p> <p><input type="checkbox"/> Property Owner      <input type="checkbox"/> Agent          (The Owner-Builder Authorization of Agent Form 1-09-09 shall be submitted and approved prior to agent approval)</p>
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<b>***** FOR OFFICE USE ONLY *****</b>			
Plan Check Fee GL: 01-160-41550-0000-1 Transaction Code: (074)	Fee: \$250.00	Date: _____	Receipt #: _____
Received By: _____			