



EXISTING COMMERCIAL BUILDING APPLICATION

CITY OF SAN RAMON

2401 Crow Canyon Road
San Ramon, CA 94583-1350
Dept. 925-973-2580, Fax 925-838-2821
building@sanramon.ca.gov

DATE: _____

APPLICATION #: _____

FEE: _____

Please print clearly and fill in all that apply.

HOA Approval Yes No

Signature _____

PROJECT ADDRESS: _____

PROJECT VALUATION: \$ _____

Project Description: _____

DESCRIPTION OF WORK:

NONRESIDENTIAL

RESIDENTIAL

New Building

Addition

Alteration

Repair/Windows

Demolition

Landscape

Sign

Foundation only

Swimming Pool/Spa

Fire Repair

Re-roof _____ sq.ft.

Deck/Patio Cover /Trellis

Cert. of Occupancy:

Other: _____

Total Building Area: _____ Sq. Ft. Building Height: _____ Ft. Stories: _____

EXISTING: FLOOR AREA: _____ GARAGE: _____ OTHER: _____ # UNITS: _____

PROPOSED: FLOOR AREA: _____ GARAGE: _____ OTHER: _____ # UNITS: _____

Number of Bedrooms: _____

Lot Size (Sq.Ft.): _____ Lot Dimension (Front/Side/Rear): _____ Coverage %: _____

Setbacks: FRONT: _____ REAR: _____ LEFT: _____ RIGHT: _____

PROPERTY OWNER / LESSEE

TENANT

ARCHITECT

DESIGNER

ENGINEER

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____ FAX #: _____

E-MAIL ADDRESS: _____

May require written approval from the owner/lessee.

LICENSE / REGISTRATION #: _____

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____ FAX #: _____

E-MAIL ADDRESS: _____

PROJECT CONTACT PERSON: _____ PHONE#: _____ FAX # _____

ADDRESS: _____ E-MAIL ADDRESS: _____

CONTRACTOR

OWNER-BUILDER

LICENSE # _____ LICENSE CLASS: _____ PHONE # _____

COMPANY NAME: _____ FAX # _____

ADDRESS: _____ E-MAIL ADDRESS: _____

CITY/STATE/ZIP: _____ SAN RAMON BUSINESS LICENSE # _____

TYPE OF CONSTRUCTION: _____ OCCUPANCY: _____ ZONE: _____ FIRE SPRINKLERS: YES NO

HAZARDOUS MATERIALS: YES NO EXISTING USE: _____ PROPOSED USE: _____

NUMBER OF PLANS SUBMITTED: _____ STRUCTURAL CALCULATIONS: _____ TITLE 24 ENERGY: _____

OTHER: _____

Submitted by (sign): _____ (Print): _____

LICENSED CONTRACTORS 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.

Date: _____ Contractor Signature: _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (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 Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure 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, through employees' or personal effort, builds or improves the property, provided that the 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 _____

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

Date: _____ Signature of Property Owner or Authorized _____

WARNING: FAILURE TO SECURE WORKERS' 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.

WORKERS' 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 workers' 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 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:

CARRIER: _____ POLICY# _____

Name of Agent _____ Phone#: _____

(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 workers' compensation laws of California, and agree that I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

DATE: _____ APPLICANT: _____

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY:

___ I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civil. Code).

Lender's Name: _____

Lender's Address: _____

Note: The following Authorization Form is required to be completed by the property owner only when designating an agent of the property owner to apply for a construction permit for the Owner-Builder.

AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNER'S BEHALF

Excluding the Notice to Property Owner, the execution of which I understand is my personal responsibility, I hereby authorize the following person(s) to act as my agent(s) to apply for, sign, and file the documents necessary to obtain an Owner-Builder Permit for my project.

Scope of Construction (or Description of Work): _____

Project of Authorized Agent: _____

Name of Authorized Agent: _____

Address of Authorized Agent: _____

City/State/Zip _____

Telephone Number of Authorized Agent: _____

I declare under penalty of perjury that I am the property owner for the address listed above and I personally filled out the above information and certify its accurate.

Note: A copy of the owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

Signature of property owner: _____ Date: _____

Disclosures & Forms for Owner-Builders Applying for Construction Permits

IMPORTANT! NOTICE TO PROPERTY OWNER

Dear Property Owner:

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified at the address on the opposite side of this application.

We are providing you with an Owner-Builder Acknowledgement and Information Verification Form to make you aware of your responsibilities and possible risk you may incur by having this permit issued in your name as the Owner-Builder. **We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned this form to us at our official address indicated.** An agent of the owner cannot execute this notice unless you, the property owner, obtain the prior approval of the permitting authority.

OWNER'S ACKNOWLEDGEMENT AND VERIFICATION OF INFORMATION

DIRECTIONS: Read and initial each statement below to signify you understand or verify this information.

___ 1. I understand a frequent practice of unlicensed persons is to have the property owner obtain an "Owner-Builder" building permit that erroneously implies that the property owner is providing his or her own labor and material personally. I, as an Owner-Builder, may be held liable and subject to serious financial risk for any injuries sustained by an unlicensed person and his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an Owner-Builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

___ 2. I understand building permits are not required to be signed by property owners unless they are responsible for the construction and are not hiring a licensed Contractor to assume this responsibility.

___ 3. I understand as an "Owner-Builder" I am the responsible party of record on the permit. I understand that I may protect myself from potential financial risk by hiring a licensed Contractor and having the permit filed in his or her name instead of my own.

___ 4. I understand Contractors are required by law to be licensed and bonded in California and to list their license numbers on permits and contracts.

___ 5. I understand that if I employ or otherwise engage any persons, other than California licensed Contractors, and the total value of my construction is at least five hundred dollars (\$500), including labor and materials, I may be considered an "employer" under state and federal law.

___ 6. I understand if I am considered an "employer" under state and federal law, I must register with the state and federal government, withhold payroll taxes, provide workers' compensation disability insurance, and contribute to unemployment compensation for each "employee." I also understand my failure to abide by these laws may subject me to serious financial risk.

___ 7. I understand under California Contractors' State License Law, an Owner-Builder who builds single-family residential structures cannot legally build them with the intent to offer them for sale, unless all work is performed by licensed subcontractors and the number of structures does not exceed four within any calendar year, or all of the work is performed under contract with a licensed general building Contractor.

___ 8. I understand as an Owner-Builder if I sell the property for which this permit is issued, I may be held liable for any financial or personal injuries sustained by any subsequent owner(s) that result from any latent construction defects in the workmanship or materials.

___ 9. I understand I may obtain more information regarding my obligations as an "employer" from the Internal Revenue Service, the United States Small Business Administration, the California Department of Benefit Payments, and the California Division of Industrial Accidents. I also understand I may contact the California Contractors' State License Board (CSLB) at 1-800-321-CSLB (2752) or www.cslb.ca.gov for more information about licensed contractors.

___ 10. I am aware of and consent to an Owner-Builder permit applied for in my name, and understand that I am the party legally and financially responsible for proposed construction activity at the address listed on the opposite side of this form:

___ 11. I agree that, as the party legally and financially responsible for the proposed construction activity, I will abide by all applicable laws and requirements that govern Owner-Builders as well as employers.

___ 12. I agree to notify the issuer of this form immediately of any additions, deletions, or changes to any of the information I have provided on this form. Licensed contractors are regulated by laws designed to protect the public. If you contract with someone who does not have a license, the Contractors' State License Board may be unable to assist you with any financial loss you may sustain as a result of a complaint. Your only remedy against unlicensed Contractors may be in civil court. It is also important for you to understand that if an unlicensed Contractor or employee of that individual firm is injured while working on your property, you may be held liable for damages. If you obtain a permit as Owner-Builder and wish to hire Contractors, you will be responsible for verifying whether or not those Contractors are properly licensed and the status of their workers' compensation insurance coverage.

Before a building permit can be issued, this form must be completed and signed by the property owner and returned to the agency responsible for issuing the permit.

Note: A copy of the property owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

Signature of property owner: _____ Date: _____



Access Upgrade Compliance Package (For Existing Commercial Buildings only)

- Step 1: Completely fill out both pages of the Access Checklist and check all appropriate boxes.**
Fill out any additional forms as specified on the Access Checklist. If you are submitting a revision to a previously approved permit, fill out page 1 of the Access Checklist only (Note: a revision is considered to be a slight modification to the original approved permit drawing set, not new or additional work). The original approved plans (or a copy of the original) are required to be brought back for reference in addition to 2 sets of the proposed revisions.
- Step 2: Filing an Unreasonable Hardship Request (UHR)**
The UHR is required to be filled out if there are areas that will not be in compliance with the access laws at the end of your project due to financial, physical, or other constraints that create unreasonable costs in proportion to the scope of work and estimated construction cost of your proposed project. The UHR is a request only and can be denied. **If an UHR is not required to be filed, skip to Step 3.** Submit a new UHR with each new application. **The UHR shall be reproduced on the plans.**
- Step 3: Submittal**
Clearly describe all work on the permit application and follow all instructions as above. Submit permit application and plans to the Building and Safety Services Division.

IMPORTANT NOTIFICATION

- Construction Cost - Field Conditions**
 1. Construction cost shall be based on the Marshall and Swift Construction Cost Index. The Building and Safety Services Division may accept bona-fide contract prices upon review and approval.
 2. The cost is used to determine the level of accessibility upgrade. In general, projects with construction costs (excluding accessibility upgrades) above the valuation threshold are required to be upgraded to a level not exceeding 20% of the project cost. Priority shall be given to accessible elements in the following order, an accessible entrance, an accessible route to the altered area, at least one accessible restroom for each sex, accessible telephones, accessible drinking fountains, accessible parking and accessible signs.
 3. Construction cost will be verified during plan check and inspection stages by the Building and Safety Service Division. In the event that the cost has to be adjusted above the valuation threshold, then the design may be required to provide additional access compliance.
 4. The design professional shall verify existing field conditions and confirm that the information provided on the plans is accurate to the best of their knowledge. A Stop Work Order or Correction Notice may be issued, or the project delayed, if the plans do not reflect the actual field conditions.
- Americans With Disabilities Act (ADA)**
Two federal laws, the Americans with Disabilities Act (ADA) and the federal Fair Housing Act, are currently in effect. They impose new federal disability access requirements on construction projects. Building and Safety Division does not enforce federal law and will not be checking plans for compliance with these requirements. It is your responsibility to make sure that your plans are in conformance with federal law.

ACCESS CHECKLIST:

For ALL tenant improvement projects in commercial use spaces, this checklist is required to be reproduced on the plan set and signed.

1. Proposed use of the project is _____ (e.g. Retail, Office, Restaurant, etc.)
2. Address of the project is _____
3. Describe the area of remodel, including which floor:

4. The construction cost of this project *excluding* accessibility upgrades is \$ _____, which is (Check one) more than less than the accessibility threshold amount of **\$161,298.00** based on the “2018 ENR Construction Cost Index” (In accordance with the 2016 California Building Code Chapter 2 definition of *VALUATION THRESHOLD*, the 2018 valuation threshold is \$161,298.00).

Conditions below must be fully documented by accompanying drawings

5. Read **A** through **G** below carefully and check the most applicable box (**one box only**):

<input type="checkbox"/> A: All existing conditions serving the area of remodel fully comply with access requirements. No further upgrades are required.
<input type="checkbox"/> B: All existing conditions serving the area of remodel that do not fully comply with access requirements will be fully upgraded with this project.
<input type="checkbox"/> C: Proposed project is less than the threshold or falls under CBC 11B-202.4 Ex. 8 ; Partial upgrades, including Equivalent Facilitation will be provided up to 20% of the project value as itemized on Form C. Priority of upgrades are to be considered in the order listed on page 2 of the D.A. Checklist. Fill out Hardship request form(s) for non-fully complying items, including for Equivalent Facilitation items. Checking box C means there are still non-complying items serving the area of remodel.
<input type="checkbox"/> D: Access features will either fully comply or be provided with Code defined Equivalent Facilitation. Submit an Unreasonable Hardship Request (UHR) for the Equivalent Facilitation items.
<input type="checkbox"/> E: Consisting only of Barrier Removal, Notice of Accessibility Violation (NOV) Compliance or Exempted Work; Fill out Form F.
<input type="checkbox"/> F: Minor revision to previously approved permit drawings only. (Note: This shall NOT be used for new or additional work) Provide previous approved permit application here: _____ Description of revision: _____ _____

Form C: ACCESS 20% RULE

BACKGROUND

The provisions of Section 11B-202.4 Exception 8, apply to existing buildings or facilities used as public buildings, public accommodations, commercial buildings or public housing. When these buildings or facilities undergo alterations, structural repairs, or additions, an accessible path of travel must be provided to the specific area of construction.

When the adjusted construction cost¹ of **alterations, structural repairs, or additions to existing buildings and facilities** within three years of the original alteration does not exceed a valuation threshold of **\$161,298.00**, the cost of compliance with Section 11B-202.4 of the 2016 California Building Code shall be limited to 20% of the adjusted construction cost of alterations, structural repairs or additions.

In choosing which accessible elements to provide, priority should be given to those elements that will provide the greatest access in the following order:

1. An accessible entrance;
2. An accessible route to the area of alteration, structural repair, or addition (see definition of accessible route in the 2016 California Building Code, Section 202 & 11B-206.2.1 for more information on accessible routes and site arrival points);
3. At least one accessible restroom for each sex serving the area of alteration, structural repair or addition;
4. Accessible telephones, if provided, serving the area of alteration, structural repair, or addition;
5. Accessible drinking fountains, if provided, serving the area of alteration, structural repair, or addition; and
6. When possible, additional accessible elements such as additional parking, storage, signs and alarms.

Required Forms

- ✓ Complete the attached application; prepare a site and floor plan of the existing and proposed accessibility improvements along the accessible route to the area of alteration that shall be submitted to the Building Division in duplicate, prior to completing the plan review. One copy of the approval or denial of the form will be returned to the applicant. See page 2 for a Sample Application.
- ✓ Note that this is not a request for hardship but is subject to approval by the Chief Building Official.
- ✓ Additionally, barrier removal is ongoing obligation for ADA and this application does not exempt the applicant of any obligations to removing barriers in a reasonable time frame and by signing this report you understand that this 20% is for this addition/alteration alone.
- ✓ Provide a complete narrative description of your project including the estimated construction costs. Letter must be on a company letterhead and prepared by the contractor.

Project Address: 123 Hope Street	Permit No.: 17-1234
Project Description/Location: Office tenant improvement (2,040 SF) at 5 th floor Suite No. 502	Permit Valuation: \$ 120,000.00
Type: <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Structural Repair <input type="checkbox"/> Addition	*Adjusted Cost of Proposed Construction: \$ 100,000.00

PATH OF TRAVEL REQUIREMENTS FOR AREA OF ALTERATION, STRUCTURAL REPAIR, OR ADDITION

Accessible Features	Does existing feature meet accessibility standards of Chapter 11B of the current CBC?	Will this feature be replaced or altered to meet Chapter 11B of the current CBC?	If so, how much will be spent to make this feature accessible?
1. Accessible entrance	NO	YES	\$ 2,400.00
2. Accessible route to the altered area	NO	PARTIAL	\$ 8,500.00
3. Accessible restroom for each sex or a unisex restroom	NO	YES	\$ 8,000.00
4. Accessible telephones	N/A	N/A	
5. Accessible drinking fountains	N/A		
6. Other (Any of the below)			
A. Accessible parking spaces	NO	YES	\$ 1,100.00
B. Signs	NO		
C. Alarms	N/A		
D. Other:			
Cost of All Features Provided (A)	Summary of costs of Accessible Features Nos. 1-6 provided above.		\$ 20,000.00
Total Cost on Same Path of Travel (B)	Construction cost for all proposed work on this permit application <u>except</u> Accessible Features Nos. 1-6 provided above.		\$ 100,000.00
Percentage Upgrades Provided (A / B)	Cost of all Features Provided / Total Cost on Same Path of Travel.		20 %

Description of Access Features Provided: New entrance landing, new accessible fixtures for the restrooms, properly mark and identify the accessible parking area, and 27 cubic yards of concrete (189 feet of sidewalk).

Hardship Request: 345 lineal feet of exterior sidewalk that exceeds 2.08% cross slope which is 3.4% - 3.8%. Without this request approval the project will not be able to happen due to lack of finances. Please see attached implementation plan and my justification for approval.

Applicant Certification
I certify that the above information is true and correct to the best of my knowledge and belief.

Signature:	<i>John Smith</i>	Date:	01 / 05 / 2017	Company:	John Smith and Associates
Name: (print)	John Smith	Address:	123 Broadway		
Title:	Architect of Record	City, State Zip:	San Ramon, CA. 94583		
Agent for:	<input checked="" type="checkbox"/> Owner <input checked="" type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor	Phone No.:	(925) 555-1212		

For Building Official Use Only

Approved by:	Title:	Date:	/ /
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*If an area has been altered without providing an accessible path of travel to that area, and subsequent alterations of that area or a different area on the same path of travel are undertaken within three years of the original alteration, the total cost of alterations to the areas on that path of travel during the preceding three-year period shall be considered in determining whether the cost of making that path of travel accessible is disproportionate.

¹ Adjusted cost of construction does not include the cost of alterations to path of travel elements required to be upgraded outside the area of alteration, structural repair, or addition.

Project Address:		Permit No.:	
Project Description/Location:		Permit Valuation: \$	
Type: <input type="checkbox"/> Alteration <input type="checkbox"/> Structural Repair <input type="checkbox"/> Addition		*Adjusted Cost of Proposed Construction: \$	
PATH OF TRAVEL REQUIREMENTS FOR AREA OF ALTERATION, STRUCTURAL REPAIR, OR ADDITION			
Accessible Features	Does existing feature meet accessibility standards of Chapter 11B of the current CBC?	Will this feature be replaced or altered to meet Chapter 11B of the current CBC?	If so, how much will be spent to make this feature accessible?
1. Accessible entrance			\$
2. Accessible route to the altered area			
3. Accessible restroom for each sex or a unisex restroom			
4. Accessible telephones			
5. Accessible drinking fountains			
6. Other (Any of the below)			
A. Accessible parking spaces			
B. Signs			
C. Alarms			
D. Other:			
Cost of All Features Provided (A)	Summary of costs of Accessible Features Nos. 1-6 provided above.		
Total Cost on Same Path of Travel (B)	Construction cost for all proposed work on this permit application <u>except</u> Accessible Features Nos. 1-6 provided above.		
Percentage Upgrades Provided (A / B)	Cost of all Features Provided / Total Cost on Same Path of Travel.		%
Description of Access Features Provided:			
Hardship Request:			
Applicant Certification			
I certify that the above information is true and correct to the best of my knowledge and belief.			
Signature:		Date: / /	Company:
Name: (print)			Address:
Title:			City, State Zip:
Agent for:	<input type="checkbox"/> Owner <input type="checkbox"/> Architect <input type="checkbox"/> Engineer <input type="checkbox"/> Contractor		Phone No.:
For Building Official Use Only			
Approved by:	Title:	Date: / /	

*If an area has been altered without providing an accessible path of travel to that area, and subsequent alterations of that area or a different area on the same path of travel are undertaken within three years of the original alteration, the total cost of alterations to the areas on that path of travel during the preceding three-year period shall be considered in determining whether the cost of making that path of travel accessible is disproportionate.

¹Adjusted cost of construction does not include the cost of alterations to path of travel elements required to be upgraded outside the area of alteration, structural repair, or addition.

