



City of Corcoran

Building Maintenance Permit

Application

832 Whitley Ave
 Corcoran, Ca 93212
 Phone: (559) 992-2151 ext. 2102
 Fax: (559) 992-2348

APPLICATION #:
DATE:
SQUARE FOOTAGE:
VALUATION:

BUILDING MAINTENANCE PERMIT PROCESSING FORM
INCOMPLETE FORMS CANNOT BE PROCESSED

PROJECT ADDRESS: _____

PROJECT NAME: _____

PARCEL NO.: _____

TYPE OF PERMIT: (please circle)	
Residential Repair	Alteration
SSB Repair	Mechanical
Temporary Gas	Demo
Temporary Electric	Patio
Code Compliance	Elect.
Sewer Connection	Plumbing
Water Heater	Carport

CONTRACTOR'S NAME:	_____
ADDRESS:	_____
CITY:	State: _____
ZIP:	Phone: () _____
LICENSE #:	Exp. Date: _____

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

APPLICANT'S NAME:	_____
ADDRESS:	_____
CITY:	State: _____
ZIP:	Phone: () _____

PACE PROGRAM: (please circle)
CFMA FIGTREE YGRENE
CSCDA HERO
OTHER: _____

PROPERTY OWNER:	_____
ADDRESS:	_____
CITY:	State: _____
ZIP:	Phone: () _____

PROJECT MANAGER:	_____
ADDRESS:	_____
CITY:	State: _____
ZIP:	Phone: () _____

Description of Work: _____

Applicant's Signature: _____ **DATE:** _____

RESIDENTIAL
PLAN SUBMITTAL CHECKLIST

Please take a moment to compare your plan sets with the checklist. This form is to assist building permit applicants in determining the adequacy of their submittal package. A complete submittal will expedite the plan check process. If the plans and other construction documents are incomplete, the plan check process could be delayed. Check the items below that are included.

- A minimum of 2 IDENTICAL SETS OF PLANS AND CALCULATIONS are required. PDF copy either email or flash drive.
 - All Plans must be assembled and stapled prior to the submittal.
 - Correct owner's name, project street number, direction, street, and suffix: phone number must be on plans.
 - COMPLETE SITE PLAN:** To scale, dimensioned, all on-site and off-site improvements, location of all existing and proposed fire hydrants, location of water and sewer connections at the city mains and to each building indicate curb, gutter, sidewalk and approach. Call out minimum FLOOD ZONE elevation.
 - COMPLETE FLOOR PLAN:** To scale and dimensioned.
 - ELEVATIONS:** A minimum of four (4) major elevations.
 - COMPLETE FOUNDATION PLAN:** Drawn to scale and dimensioned. Indicate whether plans have a conventional frame or a "truss" roof.
 - ROOF PLAN:** Indicate pitch, direction of slope, location of hips, valleys, dormers, and equipment, layout plan, location and size headers, beams, and girders. Indicate type of roof below:
 - CUT AND STACK/CONVENTIONAL FRAME ROOF:** sizes of all members (rafters, hips, valleys, ridges, and purlins).
 - COMPLETE SET OF TRUSS CALCULATIONS:** This will include layout, truss calculation sheets keyed to layout size.
 - STRUCTURAL ANALYSIS OF NON-CONVENTIONAL BUILDINGS (if applicable):** Indicating load paths and shear transfer (CBC).
 - COMPLETE DETAIL PLAN SHEET:** Including irregular construction materials and methods.
 - ELECTRICAL FLOOR PLAN:** (may be included on floor plan, if kept clear) including service size calculation.
 - MECHANICAL PLAN:** Indicating size and location of units and size of ducts and outlets.
 - COMPLETE CCR ENERGY ANALYSIS (TITLE 24 FORMS):** Provide forms. MECH, LTG, ENV, and mandatory features must appear in blueprints.
- * MASTERED SITE PLANS REQUIRE ADDITIONAL INFORMATION (See Building Official)
* MASTER PLANS REQUIRE ADDITIONAL INFORMATION (See Building Official)

INCOMPLETE SUBMITTALS WILL BE REJECTED

I have reviewed this checklist. All items checked above are included. Plans must be signed by the person who is responsible for their preparation.

PRINT OR TYPE NAME: _____

SIGNATURE: _____ DATE: _____



City of Corcoran
Building Permit & Inspection Department
832 Whitley Avenue, Corcoran, CA 93212
(559) 9922151

THIS FORM MUST BE ATTACHED TO INSPECTION CARD AT TIME OF INSPECTION

STATEMENT OF COMPLIANCE INSTALLATION OF SMOKE ALARMS
AND/OR CARBON MONOXIDE ALARMS

For Exterior work with a valuation greater than \$1,000.00. If the owner will not be available to allow the Building Inspector access to the interior of the residence, to inspect the installation of smoke and /or carbon monoxide alarms, this compliance form may be used.

ADDRESS OF WORK: _____

I, _____ (HOMEOWNER);
Print Name

I, _____; _____ (CONTRACTOR);
Print Name

- Have installed smoke alarms/carbon monoxide alarms
Circle the units installed
Have existing smoke alarms/carbon monoxide alarms
Circle the existing units .

Per the 2010 California Residential Code and the California Health & Safety Code as noted below:

Smoke Alarms: CRC Section R314 & HSC Section 13113.7 & 13113.8
Carbon Monoxide Alarms: CRC Section R315 & HSC Section 17926

The units were installed under Building Permit No. _____, and were installed as per manufacturer's installation instructions; or are existing.

I am aware that non-compliance with the California Health & Safety Code is an infraction punishable by a maximum fine of two-hundred dollars (\$200.00) for each offense.

Signature of Homeowner or Responsible Party

Date

Signature of Homeowner or Responsible Party

Date