

County of Santa Clara

Department of Planning and Development
Office of the Fire Marshal

County Government Center, East Wing
70 West Hedding St, 7th Floor
San Jose, California 95110-1705
(408) 299-5760



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 No.** _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(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.

Date _____ **Applicant** _____

NOTE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

ONE TIME PERMIT: Submit a minimum of two (maximum of three) sets of completed plans, to include workers compensation insurance certificate, hydraulic calculations, seismic bracing load calculations, manufacturer's specification sheets, etc. Provide a **separate completed** application along with the appropriate fees **for each address** with the plans. Plans will not be accepted without full payment of fees. **Contact the County Fire Marshal's Office secretary for the proper fee amount.** Checks shall be made payable to the "SANTA CLARA COUNTY". Target plan review turnaround time is thirty (30) working days however, unusual circumstances may dictate a longer turnaround time. A completed permit application is required for **all** types of work. Plans will be returned via the most economical means, or may be picked up by prior arrangement.

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of the Santa Clara County Fire Marshal's Office to enter upon the above-mentioned property for inspection purposes.

(We) agree to save, indemnify and keep harmless the Santa Clara County Fire Marshal's Office against liabilities, judgments, costs and expenses which may in any way accrue against said office in consequence of the granting of this permit.

Applicant's Signature _____ **Date** _____

Board of Supervisors: , Donald F. Gage, George M. Shirakawa, Dave Cortese, Ken Yeager, Liz Kniss
Acting County Executive Gary Graves