

RESIDENTIAL BUILDING PERMIT APPLICATION

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City of Madera

205 West 4th Street, Madera, CA 93637
(559) 661-5440 www.madera.gov

OFFICE USE ONLY

Date Received:

Code Enforcement
Case ID #:

Permit #:

Your early attention is suggested to the approval process from other City Divisions such as the Planning and Engineering Divisions, or other entities or agencies such as the San Joaquin Valley Air Pollution Control District, and the School Districts. These other departments or agencies may have requirements that could significantly affect the final design of the project. A Building Permit will not be issued by the Building Division until clearance from all other departments and agencies is obtained.

Fill out this application completely. Incomplete Submittals cannot be processed. See Minimum Submittal Requirements for required documentation.

Project / Property Owner Information

Address: _____

Subdivision: _____ APN/Lot #: _____

Owner Name: _____ Ph #: _____

Historic District: ☐ Yes ☐ No Flood Zone: ☐ Yes ☐ No**Applicant Information (Building Permit correspondence)**☐ Property Owner:

(Complete and submit Owner-Builder Declaration)

☐ Property Owner will complete the work☐ Licensed Contractor will complete the work

(Owner must provide Contractor information)

☐ Contractor (Must provide Worker's Compensation Information)☐ Authorized Agent of the Property Owner

(Must provide Authorization form & ID)

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone #: _____ Cell #: _____

Email: _____

Contractor Information (Person / Co. performing the work)

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone #: _____ Cell #: _____

Email: _____

CA Contractor's License #: _____

Description of Work: _____

REQUIRED PROJECT DATATOTAL PROJECT
VALUATION \$:

Indicate the value of the work to be performed under this permit (rounded to the nearest dollar) including all equipment, materials, labor, overhead and profit.

Construction Type:

Occupancy Type:

Fire Sprinklers:

☐ Yes☐ No

New SFR Total Living sq ft:

Total Existing Living sq ft:

Addition Living sq ft:

Number of Stories:

Number of Buildings:

Is this Permit to Clear a
Code Enforcement
Violation?☐ YesProvide copies of
the CEV Letters☐ No**TYPE OF WORK** (Check ALL that apply)

New SFR

☐

Addition

☐Interior
Alteration or
Remodel☐Garage
Conversion☐Accessory
Structure☐Mech / Elect /
Plumb☐Water Heater
Repl.☐Fire / Vehicle
Impact / Water
Damage Repair☐

Re-Roof

☐Swimming Pool /
Spa☐

ADU

☐

Demolition

☐

Patio

☐Masonry Fence /
Other☐

(See page 2 for more required information)

WORKER'S COMPENSATION INFORMATION☐ Maintain Worker's Compensation Insurance

Policy Number:

Carrier:

Expiration Date:

☐ Self-Insured (Provide Information)☐ Exempt from Worker's Comp. (Provide Proof)

APPLICANT STATEMENT: I certify that I have read this application and state that all required information and documentation are included and correct. I agree to comply with all the applicable most current building codes, all city ordinances and state laws relating to building construction.

PRINT OR TYPE NAME: _____

SIGNATURE: _____

DATE: _____

Provide ALL applicable information:

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NEW SFR or ADU		ELECTRICAL		MECHANICAL		PLUMBING	
Total Living sq. ft.:		# of Receptacle Outlets:		Split HVAC:		Sewer Lin. Ft.:	
Garage sq. ft.:		# of Lights:		Packaged HVAC:		Water Ser Lin. Ft.:	
Patio sq. ft.:		Main Service Panel (Amps):		New Duct Work Lin. Ft.:		# of Fixtures:	
Balcony/ Deck sq. ft.:		Subpanel (Amps):		Ex. Hood & Duct:		# Gas Outlets:	
Porch sq. ft.:		Rewire Sq. Ft.:		Furnace:			
Type of Const.:		Power Apparatus:		Gas System Outlets:			
Occupancy:		Other electrical:		Coils or condensers:			
Fire Sprinklers:				Misc. Appliances:			
CONST. VALUATION \$:							
ADDITION		ELECT. PANEL CHANGE OUT		HVAC CHANGE-OUT		WATER HEATER CHANGE OUT	
Total New sq. ft.:		Existing Panel Rating (Amps):		Split HVAC:		Tankless:	
Type of Const.:		New Panel Rating (Amps):		Packaged HVAC:		Tank:	
Occupancy:		Relocated more than 6ft.?		Tons:		Heat Pump	
		Top Fed?		BTUs:			
		Bottom Fed?		SEER:			
VALUATION \$:		VALUATION \$:		VALUATION \$:		VALUATION \$:	
REMODEL OR ALTERATION		ELECTRICAL		MECHANICAL		PLUMBING	
Total New sq. ft.:		Rewire Sq. Ft.:		Mini-Split HVAC Syst.:		Sewer Repair:	
Area:		# of (N) Lights:		Wall Furnace/Heater:		Water Softener:	
		# of (N) Receptacle Outlets:		New Duct Work Lin. Ft.:		Gas Line Lin. Ft.:	
VALUATION \$:		VALUATION \$:		VALUATION \$:		VALUATION \$:	
PATIO				WINDOW REPLACEMENT		POOL/SPA	
Total New sq. ft.:				# of like for like Window:		Pool Sq. Ft.:	
Type of Const.:				# of New Windows:		Spa Sq. Ft.:	
Attached or Detached:						Gas Line Lin. Ft.:	
VALUATION \$:				VALUATION \$:		VALUATION \$:	
MASONRY FENCE		Number of Pilasters:		OTHER			
Fence Lin. Ft.:		Height of Pilasters:		Stucco Sq. Ft. (area):		Overhead Water	
Fence Height:		Width of Pilasters:		# of Vent Fan(s):			
Engr'd or City Detail?		Motorized Gate Y/N?		Pool Pump (Equip.):			
VALUATION \$:		If Y, Elect. permit needed				VALUATION \$:	
RE-ROOF		Tear Off / Overlay:		DEMOLITION (Description:)			
Roof Slope:		Only 1 Exist. Layer:		Structure:			
Roofing Material:		ICC ESR #:		Swimming Pool:			
Sq. Ft. of Roof Area:		Provide a copy of ESR		Water Well:			
VALUATION \$:		Provide "Re-Roof" Packets		Septic System:		VALUATION \$:	