Corte Madera CALIFORNIA

APPLICATION for BUILDING PERMIT

300 Tamalpais Drive
Corte Madera, CA
415.927.5062 (fax: 5039)

Clerical Time: ___ . __ Init. ____

Please print clearly and fill in all applicable information.
(Do not write in blue-shaded areas.)

Appl. No.:

PROJECT ADDRESS:

❒ RESIDENTIAL ❒ COMMERCIAL VALUATION OF CONSTRUCTION (Labor & Materials): $ _____

DESCRIBE THE SCOPE OF WORK FOR THIS PROJECT (and check all that apply below):

❒ New Building ❒ Addition ❒ Alteration ❒ Repair ❒ Commercial T.I. ❒ Fire Prot. System ❒ Mechanical
❒ Electrical ❒ Elect. Service Change ❒ Plumbing ❒ Gas Water Heater (Min. EF: storage = 0.67; instant = 0.62) ❒ Other

NOTE: All of Corte Madera is in Climate Zone #3 (except for properties north of Sandpiper Circle and Wornum Way which are in Climate Zone #2.)

❒ **Re- Roofing residential, steep-slope** (over 2:12): per C.E.C. Section 152(b)1H; clay & concrete tile roofs require a min. aged solar reflectance value of 0.15 and a min. thermal emittance value of 0.75 or a solar reflectance index (SRI) of 10. CRRC material packaging label required on site.

❒ **Re- Roofing commercial, low-slope** (2:12 or less): must comply with C.E.C. Section 149(b)1B; cool roof with a min. aged solar reflectance value of 0.55 and a min. thermal emittance value of 0.75 or a solar reflectance index (SRI) of 64. CRRC material packaging label required on site.

❒ **Re- Roofing commercial, steep-slope** (over 2:12): must comply with C.E.C. Section 149(b)1B; asphalt shingle & metal roofs require a min. aged solar reflectance value of 0.20 and a min. thermal emittance value of 0.75 or a solar reflectance index (SRI) of 16; clay tile, concrete & synthetic roofs require a min. aged solar reflectance value of 0.15 and a min. thermal emittance value of 0.75 or a solar reflectance index (SRI) of 10. CRRC material packaging label required on site.

❒ **Furnace** (❒ **A/C**) **replacement**: For Climate Zone #3: setback thermostat and A/C refrigerant charge verification is required (duct testing is not required.) For Climate Zone #2: setback thermostat and A/C refrigerant charge verification is required and the duct system shall be sealed and tested for leakage using an approved HERS rater per Section 152(b)1E of the 2008 CA Energy Efficiency Standards.

❒ **Window replacement (residential – no framing changes)**: per Section 152(b) & Table 151-C of the 2008 CA Energy Efficiency Standards, for Climate Zone #3: manufactured replacement fenestration products shall not exceed a maximum U-Factor of 0.40. For Climate Zone #2: the maximum U-Factor is 0.40 & the maximum SHGC is 0.40. (Tubular skylights and greenhouse windows require only dual-glazing.)

APPLICANT INFORMATION:

Name: _____ Phone: (_____) _____ - _____

Street Address: _____

City/State/ZIP: _____

Fax #: (_____) _____ - _____ E-mail Address: _____

Applicant is: ❒ OWNER ❒ DESIGNER ❒ CONTRACTOR ❒ AGENT ❒ OTHER:

OWNER INFORMATION:

Name: _____ Phone: (_____) _____ - _____

Street Address: _____

City/State/ZIP: _____

Fax #: (_____) _____ - _____ E-mail Address: _____

DESIGNER INFORMATION:

Name: _____ License/Registration #: _____

Business Name: _____ Phone: (_____) _____ - _____

Street Address: _____

City/State/ZIP: _____

Fax #: (_____) _____ - _____ E-mail Address: _____

CONTRACTOR INFORMATION:

Name: _____ License #: _____

Business Name: _____ Phone: (_____) _____ - _____

Street Address: _____

City/State/ZIP: _____

Fax #: (_____) _____ - _____ E-mail Address: _____

BY MY SIGNATURE BELOW, AND AS NOTATED WITHIN THIS DECLARATION, I CERTIFY TO EACH OF THE FOLLOWING: (1) that the permit(s) associated with this application are to be issued in the name of the ❒ LICENSED CONTRACTOR (or) ❒ PROPERTY OWNER as the permit holder of record who will be liable for the construction; (2) that I am ❒ a California Licensed Contractor (or) ❒ the Property Owner* (or) ❒ authorized to act on the Property Owner's behalf**; (3) that I understand that plans submitted to the Town of Corte Madera for review are assumed to be finished construction documents and that in cases where plans and/or documents are incomplete, or do not indicate compliance with required code and ordinance provisions, a plan review correction report will be issued by the Building Department as well as by other agencies of the Town of Corte Madera responsible for project review; (4) that the plan review fee paid at the time of initial document submittal is a deposit that is designed to cover the cost of the Building Department's initial plan review and first re-review of submitted application materials and that additional fees may be assessed due to the need for consultant review services; (5) that plan review activities conducted by other Town of Corte Madera agencies may result in the assessment of additional fees as stipulated in the policies and procedures of such agencies; (6) that projects that exceed $10,000 in valuation will be assessed a Street Impact Fee equal to 1% of the project valuation at the time of permit issuance; (7) that I have entered, and reviewed, the information contained in this permit application and that said information is accurate and complete to the best of my knowledge. I further affirm and understand that this application will expire by limitation if a permit has not been issued within 180 days of the date of application and agree to comply with all applicable city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city or county to enter the above-identified property for inspection purposes.

[* requires separate verification form]
[** requires separate authorization form]

_____ Applicant Signature _____ Date

Receipt #: _____ ❒ CASH ❒ CHECK ❒ CREDIT CARD ❒ OTHER:

Permit Fee (101-16-4050): $ _____ Plan Ck Deposit (101-16-4100): $ _____

SMIP Fee (101-5100): $ _____ Bus. Lic. Fee (101-11-1800): $ _____ Fire Dept. Fee (101-24-4750): $ _____

Bldg. Cost Recvry (101-16-4200): $ _____ Plan Ret. (101-16-4250): $ _____ Received By: _____ Date: _____