



(Dept. Use Only)
Permit # _____

CITY OF GALT
Community Development Department, Building Division
495 Industrial Drive, Galt, CA 95632
Phone (209) 366-7200 • Fax (209) 744-1642
Web address: www.ci.galt.ca.us

TENANT IMPROVEMENT PERMIT APPLICATION

NOTE! Please fill in all blanks or mark as N/A

Project Address _____

Project Description _____

Circle all that apply to project: Building Mechanical Plumbing Electrical

Tenant Improvement square footage _____

Assessors Parcel # - _____ - _____ - _____ **Valuation \$** _____
(Parcel # can be obtained from the Building Division) *(material & labor cost)*

Property Owner _____ Phone # _____

Mailing Address _____ City _____ State _____ Zip _____

Contractor/Owner _____ Phone # _____

E-mail _____ Cell # _____ Fax # _____

Mailing Address _____ City _____ State _____ Zip _____

License Type _____ No. _____ Expiration Date _____

Project Manager _____ Phone # _____

Applicant Signature _____ **Date** _____

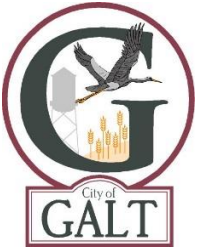
Curb, gutter, and sidewalks may be required (where non-existent or in disrepair) as a condition for permit issuance. The Building Official will determine if public improvements are needed, as required by the City of Galt Municipal Code.

Department Use Only

Department Approval Record

Public Works: _____ Date: _____
Planning: _____ Date: _____
Building: _____ Date: _____

Housing Tracking Form Completed? Y/N _____
Historic Structure Y/N _____
NEASP Y/N _____
Redev. Area Y/N _____
Zoning _____

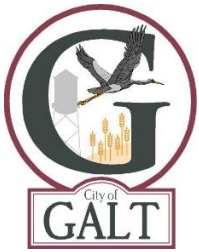


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TENANT IMPROVEMENT CHECKLIST

- ___ 1. Contractor information: ___ copy of pocket license
___ copy of Workers Comp. Ins. or
Signed waiver
- ___ 2. Application
- ___ 3. Tenant Improvement Information form
- ___ 4. Owner Builder Information form
- ___ 5. 2 complete stamped sets of plans w/dimensions (18" x 24")
1 complete stamped set of plans (11"x 17")
- ___ 6. Energy documents attached to plans and signed
- ___ 7. Copy of contract **or** valuation of materials and labor
- ___ 8. School fee form (if not paid in advance by owner)

Applicant must submit a set of plans directly to Cosumnes CSD Fire District at:
8812 Elk Grove Blvd., Elk Grove (916) 405-7111.



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TENANT IMPROVEMENT INFORMATION FORM

1. Please give a detailed description of your business operation. Identify what type of products are manufactured or stored, the method of manufacture, etc.
2. List any chemicals used and/or stored in the building or on-site. Where will they be stored?
3. Is dust or other airborne products produced by what you do?
4. What kind of rack storage will be used?
5. How many total employees are on the maximum shift?
6. Describe your truck traffic patterns (number of vehicles, peak hours, etc.)

Contact Person:

Name

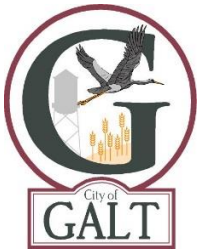
Title

Address

City, State, Zip

Phone

Fax



OWNER BUILDER INFORMATION

Dear Property Owner:

For your protection you should be aware that as an “owner-builder” you are the responsible party of record on such a permit. Building permits are not required to be signed by property owners unless they are personally performing their own work. If your work is being performed by a licensed contractor, you may protect yourself from possible liability if that person applies for the proper permit in his or her name.

Contractors are required by law to be licensed and bonded by the State of California. They are also required by law to put their license number on all permits for which they apply.

If you plan to do your own work, with the exception of various trades that you plan to subcontract, you should be aware of the following information for your benefit and protection:

If you use the volunteer labor of your immediate family, then you are not legally an employer. If you hire or otherwise engage, for \$500 or more for the entire project, any person other than your immediate family, and those persons are not licensed as contractors or subcontractors, then you may legally be an employer. Being an employer means you have certain legal responsibilities.

If you are an employer, you must register with the state and federal government as an employer and you are subject to several obligations including state and federal income tax withholding, federal social security taxes, workers' compensation insurance, disability insurance costs, and unemployment compensation contributions.

There may be financial risks for you if you do not carry out these obligations, and these risks are especially serious with respect to workers' compensation insurance.

For more specific information about your obligations under federal law, contact the Internal Revenue Service (and, if you wish, the U.S. Small Business Administration), Department of Benefit Payments, and the Division of Industrial Accidents.

If the structure is not intended for sale, property owners who are not licensed contractors are allowed to perform their work personally or through their own employees without a licensed contractor or subcontractor only under limited conditions.

A frequent practice of unlicensed persons professing to be contractors is to secure an owner-builder building permit, erroneously implying that the property owner is providing his or her own labor and material personally. Building permits are not required to be signed by property owners unless they are performing their own work personally.

Information about licensed contractors may be obtained by contacting the **Contractors' State License Board (800-321-2752)**.

Owner Builder Verification

1. Check one - I or my immediate family (parent, spouse, or child) will perform:
 A. All the work authorized by this permit. B. A portion of the work. C. None of the work.

If B or C is checked, complete 2 or 3.

2. A state licensed contractor (*) will be hired to do: All of the work A portion of the work.

Name: _____

Address: _____

Phone: _____ **Email:** _____

Type of Work: _____

3. I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers' Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the Owner-Builder information above.

Signature of Property Owner _____ **Date** _____

Job Address _____ **Permit #** _____

*Note: Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Division. The Building permit will not be issued until the owner verification form is returned. (Health & Safety Code Section 19831.)