



**Department of Planning and Community Development  
Building Permits Division**

1010 10<sup>TH</sup> Street, Suite 3400, Modesto, CA 95354  
 Planning Phone: (209) 525-6330 Fax: (209)525.5911  
 Building Phone: (209) 525-6557 Fax: (209) 525-7759

**APPLICATION FOR BUILDING PERMIT**

<b>JOB SITE ADDRESS</b> _____ CITY _____ ZIP _____ LOT _____ SUBDIVISION _____	NEAREST CROSS STREET _____ APN _____ - _____ - _____
<b>OWNER NAME</b> _____ <u><b>MAILING ADDRESS</b></u> _____ CITY, STATE _____ ZIP _____ PHONE (____) _____ FAX (____) _____ EMAIL ADDRESS _____	<b>CONTRACTOR NAME</b> _____ MAILING ADDRESS _____ CITY, STATE _____ ZIP _____ PHONE (____) _____ FAX (____) _____ CONTRACTORS LICENSE # _____ CLASS _____ WORKERS COMP? <input type="checkbox"/> YES <input type="checkbox"/> NO EMAIL ADDRESS _____
<b>APPLICANT NAME</b> _____ MAILING ADDRESS _____ CITY, STATE _____ ZIP _____ PHONE (____) _____ FAX (____) _____ EMAIL ADDRESS _____	<b>CONTACT NAME</b> _____ MAILING ADDRESS _____ CITY, STATE _____ ZIP _____ PHONE (____) _____ FAX (____) _____ EMAIL ADDRESS _____

**DESCRIPTION OF WORK TO BE PERFORMED**

<b>ESTIMATED VALUATION</b> \$ _____	SEWER OR SEPTIC	WATER DISTRICT OR PRIVATE WELL
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SQUARE FOOTAGE OF WORK:	RES _____	GARAGE _____	PATIO _____
AGRICULTURAL _____	COMM / INDUST _____	OFFICE _____	OTHER _____

FIRE HAZARD AREA? YES NO      FLOOD ZONE? YES NO      WILLIAMSON ACT? YES NO

<b>BY SIGNING &amp; DATING APPLICATION, APPLICANT ACKNOWLEDGES</b> 1) PERMIT AND APPLICATION FEES ARE NON REFUNDABLE BEGINNING 180 DAYS AFTER FEE PAYMENT. 2) ONLY A PROPERTY OWNER OR LICENSED CONTRACTOR ( <b>NOT A TENANT OR LESSEE</b> ) MAY BE ISSUED A PERMIT  APPLICANT'S SIGNATURE _____ DATE _____  THIS APPLICATION <b>SHALL EXPIRE 180 DAYS</b> FROM THE APPLICATION DATE	<b>OFFICIAL USE ONLY</b>     
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PERMIT # BLD20 \_\_\_\_\_ - \_\_\_\_\_      PC FEE \_\_\_\_\_      DATE \_\_\_\_\_      REC'D BY \_\_\_\_\_

## STANISLAUS COUNTY – BUILDING PERMIT APPLICATION CHECKLIST

This checklist is to provide you with a guide to the documents and quantities of documents, which will be needed to process your application. This list may not be all-inclusive as each project is unique within itself. If you have any questions or would like personal assistance with this form, please call (209) 525-6557 Monday through Friday. Phone hours are 8:00 a.m. to 4:30 p.m. Office hours are 8:30 a.m. to 4:30 a.m.

**All plans except site plan are to be drawn to a minimum 1/4" scale on 11" x 17" or larger unlined non grid paper.**

<b>BUILDING CODE CURRENTLY IN EFFECT – 2016 CBC, CEC, CPC, CMC, CFC AND CGC</b>	<b>OFFICIAL USE ONLY</b>
<b>Items Required For Submittal</b>	
<b>Site Plan Drawn To Scale</b> – Show Complete Parcel with all Dimensions; Location of Proposed Work; Driveway Location and Width; Easements; The Direction North; Well Location; Existing and proposed Septic System; All Setbacks from: Property Lines, Existing Structures, Pools, Septic System, Etc. (3 Sets)	
<b>For Commercial Or Agricultural Projects</b> - Site plan that shows all items listed above <b>plus</b> Access Roads on Property, Fire Hydrants and/or Water Supplies Existing and/or Proposed. Fire Marshal Requirements 552-3700	
<b>Floor Plan</b> - show existing and Proposed area, label use of all rooms (3 Sets)	
<b>Foundation Plan</b> and Related Details (2 sets)	
<b>Floor Framing Plan</b> and Related Details (2 sets)	
<b>Wall Framing</b> and Related Details (2 sets)	
<b>Roof Framing</b> and Related Details or <b>Engineered truss calculations</b> and layout (2 sets)	
<b>Construction Details</b> (2 sets)	
<b>Elevations</b> - Front, Both Sides and Back (3 sets)	
<b>Engineering Calculations</b> - Stamped and Wet Signed (2 sets)	
<b>Electrical Plan</b> with Legend (2 sets) – Residential – single line diagram	
<b>Plumbing Plan</b> with Legend (2 sets) – Residential – fixtures only	
<b>Heating and Air Conditioning Plan</b> and Title 24 Energy Calculations (2 sets)	
<b>Grant Deed</b> - Recorded copy that shows the parcel split date and legal description – All pages	
<b>Assessor Records</b> – complete copies. These may be obtained from Stanislaus County Assessor's Office 525-6461	
<b>San Joaquin Valley Air Pollution Control District</b> approved release – Obtain approval from 4800 Enterprise Way, Modesto 557-6400	
<b>For Commercial Projects</b> – Engineered Aerobic System DER Requirements 525-6700	
<b>For Residential Projects</b> – Aerobic Septic System (for parcels created after 7/13/90 and less than ten acres). Engineered system required under special circumstances - DER Requirements 525-6700	
<b>Property Owner's Package</b> – Required to be completed for all owner/builder permits	
<b>Flood Zone Area</b> – Provide elevation certificate	
<b>Williamson Act</b> land owner statement	

### BELOW FOR OFFICIAL USE ONLY

By signing below, I am acknowledging that I understand processing and/or Department reviews may be incomplete or delayed until the items marked below are submitted.

\_\_\_\_\_ The items marked in the above shaded area are still required to process my building permit application.

\_\_\_\_\_ I acknowledge that required departmental review fees have not been paid.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Amount Due

Case Number BLD20\_\_\_\_\_ - \_\_\_\_\_

Clerks Initials: \_\_\_\_\_

Project Address: \_\_\_\_\_

**STRIVING TOGETHER TO BE THE BEST!**