State of California Business, Transportation and Housing Agency DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT

Division of Codes and Standards



HCD 415 APPLICATION FOR □ Alteration □ Addition or Conversion ☐ Alternate Approval ☐ Technical Services Inspection To Obtain Insignia

CONTRACTOR / OWNER-BUILDER DECLARATIONS Not required for Special Purpose Commercial Modular	SECTION 1 - UNIT INFORMATION	
1. LICENSED CONTRACTORS DECLARATION	I / We are requesting services for the following unit(s): (Check Appropriate Box)	
I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.	Manufactured Home/Mobilehome Multifamily Manufactured Home	DTN / Permit No.
License Class Lic. No Exp. Date	Commercial Modular (Occupancy Group) Special Purpose Commercial Modular	Fee
ContractorDate	Decal Number	Date
2. OWNER-BUILDER DECLARATION	Serial Number(s) / VIN Number	- AA No
I hereby affirm under penalty of perjury that I am exempt from the Contractors' License Law for the following reason:		
(Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' License Law Chapter 9	Manufacturer Name / Model Name	RT TO
(commencing with Section 7000 of Division 3 of the Business and Professions Code) or that he or she is exempt there from and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500))	Year of Manufacture	
[] I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended of offered for sale.	Insignia / HUD Label Number(s)	
(Sec. 7044, Business and Professions Code: The Contractors' License Law does not apply to an owner of property, who builds or improves thereon, and who does such	Owner_	
work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).	Address	
[] I, as owner of the property, am exclusively contracting with licensed	CityCounty Location Address	·
contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors' License Law does not apply	Park Name (If Applicable)	
to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors' License Law.).	Applicant	
[] I am exempt under Sec, B. & P.C. for this reason:	Address	
11:4 01	CityCounty	
Owner Victor Chan Date	Telephone – Applicant Homeo	
3. WORKERS' COMPENSATION DECLARATION	Tomes	(If Different than Applicant)
I hereby affirm under penalty of perjury one of the following declarations:	SECTION 3 – CONTRACTOR, ARCHITECT OR ENGINEER INFORMA	ATION
[] 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.	Contractor's Name	
[] 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:	AddressArchitect / Engineer Name	
Carrier	Registration No	
Policy Number	Address	
[] 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 workers' compensation laws of California, and agree that if I should become subject to workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.	SECTION 4 – DESCRIPTION OF WORK / ACTIVITY AND VALUATION Describe the proposed work / activity in detail. Attach additional pages if necessary. Where structural alterations or additions are proposed, complete plans, specifications, details, and calculations are required to be attached to this form. Provide the make and model of any	
ApplicantDate	appliance to be installed and provide complete electral alternations or additions.	
WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.	allemations of additions.	
4. CONSTRUCTION LENDING AGENCY		
I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).	Indicate the Total Cost of the Work to be Performed	
Lender's Name	SECTION 5 - SIGNATURE AND CERTIFICATION L / We hereby make application for the services designated above	
Lender's Address	I / We hereby make application for the services designated above.	
5. CERTIFICATION	signature Victor Chen Do	te
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 this county to enter upon the above-mentioned property for inspection purposes.	**DEPARTMENT USE ONLY*	**
орол то авоточнонного ргорону тог вървенон рогрозвъ	Permit Expiration Date	
	☐ APPROVED ☐ CONDITIONS (see reverse side)	■ DISAPPROVED (see reverse side)
Victor Chen	Issued By:	Date:
Signature of Applicant or Agent Date	Closed / Signature of District Representative	Date
HCD 415 (Rev. 07/2013)	DISTRIBUTION: YELLOW – DEPARTMENT WHITE – AREA O	