

CITY OF MISSION VIEJO

BUILDING SERVICES DIVISON

200 CIVIC CENTER, MISSION VIEJO, CA 92691 (949) 470-3054

CONTRACTOR PERMIT DISCLOSURE

Property Address:		
LICENSED CONTRACTOR'S DECLARA	ATION	
I hereby affirm under penalty of perjury that 1 7000) of Division 3 of the Business and Profe		
Contractor:	License Class	License No.
Contractor/Authorized Agent Signature		Date
WORKERS' COMPENSATION DECLAR	RATION	
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.		
I hereby affirm under penalty of perjury one of the following declarations:		
I have and will maintain a certificate of Director of Industrial Relations as provided for which this permit is issued.	of consent to self-insure for workers' control by Section 3700 of the Labor Code, for	• •
I have and will maintain workers' cor for the performance of the work for which this policy number are:	npensation insurance, as required by Secs permit is issued. My worker's compen	
Carrier:	Policy No.	Exp. Date
Contractor/Authorized Agent Signature		Date
Phone No.		
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 the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.		
I certify that I have read this construction application and that the information I have provided is correct. I agree to comply with all City and County ordinances and State Laws relating to building construction. I authorize representatives of the City of Mission Viejo to enter upon the above-identified property for inspection purposes.		
Print Name		
Signature		Date