

CONTRACTOR DECLARATION

The following declarations must be provided

Contractor Name:				CSLB#:	
Address:				License Class(s):	
	Street address		Apt/Unit#		
		0	7: 0 /	Expiration Date:	
	City	State	Zip Code		
Phone Number:		Email:			
City of Solana Beach	n Business Certificate Number:				
Licensed Contra	ctor Declaration:				
-	penalty and perjury that I am licens I Professions Code, and my license	•	-	er 9 (commencing with	Section 7000) of Division
Signature:				Date:	
Workers' Compe	ensation Declaration Warni	ng:			
COMPENSATION, DA I hereby affirm under A. I have and	IL FINES UP TO ONE HUNDRED TO AMAGES AS PROVIDED FOR IN SE penalty of perjury one of the follow I will maintain a certificate of consposition of the provided for by Section 3700 of the	ECTION 3706 OF THe ving declarations: ent to self-insure for	HE LABOR (CODE, INTEREST, AND	O ATTORNEY'S FEES. by the Director of Industrial
Policy Numb	oer:				
	I will maintain workers' compensance of the work for which this perm				
Insurance Carrier:				Policy Number:	
Agent Name & Phone	e Number:			Expiration Date:	
to become	nat, in the performance of the work e subject to the workers' compens ation provisions of Section 3700 of	ation laws of Califo	rnia, and a	gree that, if I should be	come subject to the workers
Signature:				Date:	
Declaration Peg	arding Construction Lending	of Δgency			
_	enalty of perjury that there is a construc		or the perfor	mance of the work for wh	nich this permit is issued
Lender's Name:			Phone	:	
Address:					