



City of Laguna Niguel
Building Division
30111 Crown Valley Pkwy
Laguna Niguel, CA 92677
(949) 362-4360
www.cityoflagunaniguel.org

PERMIT DISCLOSURE

132

Property Address: _____ **Permit No.:** _____

WORKERS COMPENSATION DECLARATION CONTRACTORS ONLY

LICENSED CONTRACTOR'S DECLARATION

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.

Contractor: _____ License Class _____ License No. _____

Contractor/Authorized Agent Signature _____ Date _____

WORKERS' COMPENSATION DECLARATION

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 consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

_____ 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:

Carrier _____ Policy No. _____ Exp. Date _____

Contractor/Authorized Agent Signature _____ Phone# _____

_____ 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 this City or County to enter upon the above-identified property for inspection purposes.

Print Name _____

Signature _____ Date _____