



## 2019 FIRE ALARM PERMIT/PLAN SUBMITTAL CHECKLIST

Permit No.: \_\_\_\_\_ (for use by City Staff)

**This submittal checklist is required to be completed by the applicant prior to submittal with all applicable sheets identified in columns provided and will be used to ensure that all items and sufficient detail is included before accepted for review.**  
**APPLICANT SIGNATURE REQUIRED ON PAGE 2 OF 2 OF THIS DOCUMENT**

### DIGITAL PLAN REVIEW SUBMITTAL REQUIREMENTS:

PDF Submittals must be complete with all required documents and clearly labeled on a Single Flash Drive, CD, or emailed in a single email to

[PlanSubmittal@CityofSLT.US](mailto:PlanSubmittal@CityofSLT.US)

Dropbox and/or Google Drive links are encouraged if emailing as file sizes are so large. Incomplete submittals will be rejected and sent back.

**All Plan Reviews, both initial submittals and re-submittals require – A Complete PDF Submittal containing the following:**

- ✓ **PDF #1 - All City Applications & Checklists on One (1) single PDF.**
  - File to be Named: Address\_Permit#\_PC#\_CityApplications
- ✓ **PDF #2 - All plan sheets combined and in order on One (1) single PDF**
  - File to be Named: Address\_Permit#\_PC#\_Plans
- ✓ **PDF #3 - Supporting Documents on One (1) single PDF with cover page.**
  - File to be Named: Address\_Permit#\_PC#\_SupDocs

If Permit # is unknown upon first submittal please indicate TBD in place of Permit #  
 PC# Refers to Plan Check # Starting with PC1

## PDF Submittal Requirements Checklist

**Applicant Use:**  
 Included

N/A

**Staff Use Only:**  
 Included Missing

PDF # 1 - Application	PDF #1 - All City Applications & Checklists combined into One (1) single PDF by applicant. File to be Named: Address_Permit#_PC1_CityApplications			
		Fire Alarm Building Submittal Checklist	This Form	
		Permit Worksheets	Page 3 & 4	
		Credit Card Authorization Form	Page 5	
PDF # 2 - Plans		All Plans Combined in order per plan index on cover sheet		
PDF #3 Supporting		Spec Sheets		

### Plan sets shall consist of:

Sheet #

Project name & address, as well as project owner's name, address, phone number, Contractor's Contact Information and C-10 license number	
Assessor Parcel Number (APN)	
Detailed description of scope of work along with Index of drawings	
Vicinity map identifying the subject property, the adjoining streets, and the major streets in the surrounding area within a one-quarter mile radius of the site and North arrow	
Occupancy Classifications per the current California Building Code.	
Code system was designed to: NFPA 13, 13R or 13D and System specifics : Wet, Dry, Pre-action, Anti-freeze	

Equipment List	
Equipment Legend	
Material Data Sheets	
Current California State Fire Marshal (CSFM) Listing Sheets	
Fire Alarm Floor Plan including appliance locations, wiring circuits, room names, and stated scale.	
Point to Point Wiring (Riser) Diagram	
Sequence of Operation	
Appliance Mounting Details	
Wire Gauge Legend for Initiation and Notification Circuits.	
Voltage Drop Calculations.	
Battery /Secondary Power Calculations.	
ADA/CBC requirements detailed clearly on plans.	

**I verify that I am submitting all the required materials on this checklist and I acknowledge that failure to comply with these requirements may result in my application not being accepted and/or may extend the length of time needed to review the project.**

**Applicant (Applicant Representative) Name Print:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_





# BUILDING PERMIT APPLICATION

Development Services Department · Building and Safety Division  
 South Lake Tahoe, California 96150-6251  
 (530) 542-6010 · (530) 541-7524 FAX · [PermitCenter@CityofSLT.US](mailto:PermitCenter@CityofSLT.US)

SUBMITTAL DATE:	<b>OFFICE USE ONLY</b>	PERMIT NUMBER:
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RESIDENTIAL:	NON-RESIDENTIAL:	
<b>PROJECT ADDRESS:</b>		APN:

PROPERTY OWNER AKA **OWNER-BUILDER:** \_\_\_\_\_ **OR** **CONTRACTOR:** \_\_\_\_\_

## PROPERTY OWNER INFORMATION (REQUIRED)

NAME:			
MAILING ADDRESS:		CITY, STATE, ZIP:	
PHONE:		CELL:	
E-MAIL:		FAX:	
TENANT DBA:			

**PLEASE NOTE: TENANT MUST PROVIDE [PROPERTY OWNER AUTHORIZATION FORM](#)**

## REPRESENTATIVE OR DESIGN PROFESSIONAL

ARCHITECT	_____	ENGINEER	_____	DESIGNER	_____	REPRESENTATIVE	_____	N/A	_____
NAME:					COMPANY NAME:				
MAILING ADDRESS:					CITY, STATE, ZIP:				
PHONE:					CELL:				
E-MAIL:					FAX:				

**PLEASE NOTE: REPRESENTATIVE OR DESIGN PROFESSIONAL MUST PROVIDE [PROPERTY OWNER AUTHORIZATION FORM](#)**

PLAN REVIEW CONTACT PERSON (WHERE APPLICABLE):	
PHONE:	E-MAIL:

## CONTRACTOR INFORMATION

CONTRACTOR NAME:			
MAILING ADDRESS:		CITY, STATE, ZIP:	
PHONE:		CELL:	
EMAIL:		FAX:	
LICENSE #:		LICENSE TYPE:	EXPIRATION DATE:
CITY BUSINESS LIC. # (REQUIRED):		EXPIRATION DATE:	

**PROJECT VALUATION (AS IF A LICENSED CONTRACTOR PERFORMED THE WORK, MATERIALS AND LABOR): \$**

**FULL SCOPE OF WORK TO BE PERFORMED:**


_____	IF YOUR PROJECT IS A TRPA QE, PLEASE PROVIDE THE TRPA QE APPLICATION ALONG WITH THE CITY APPLICATION. CLICK <a href="#">HERE</a> FOR LINK. <b>NOTE FOR DECKS AND SHEDS:</b> PHOTOS REQUIRED OF LENGTH AND WIDTH SHOWING CURRENT SIZE OF DECK, AS WELL AS VIEWS FROM BACK AND SIDE YARD OF UNIT TO BE REPLACED, PER TRPA QE INSTRUCTIONS.
_____	<b>KITCHEN OR BATHROOM REMODELS:</b> REQUIRE DRAWINGS OF EXISTING LAYOUT AND PROPOSED LAYOUT OF ROOM BEING REMODELED, TO SCALE, WITH CODE UPGRADES ON 8" x 11" PAPER. SEE EXAMPLES AND CODE REQUIREMENTS VIA THESE LINKS: <a href="#">TIP SHEETS: KITCHEN;</a> <a href="#">BATHROOM.</a>
_____	<b>HOMES PURCHASED WITHIN THE LAST SIX MONTHS:</b> INCLUDE COPY OF GRANT DEED
_____	<b>HOMES IN HOAs:</b> INCLUDE APPROVAL FROM HOME OWNER'S ASSOCIATION

<b>Owner-Builder Declaration (Please choose one):</b> I hereby affirm under penalty of perjury that I am exempt from the Contractor's 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 Contractor's License Law (Chapter 9 (commencing with Section 7000 of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom 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).			
	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 or offered for sale (Sec. 7044, Business and Professions Code: The Contractor License Law does not apply to an owner of property who builds or improves thereon, and who does such 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).		
	I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professional Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).		
	I am exempt under Sec. _____, B. & P.C. for this reason _____		
<b>PROPERTY OWNER/AUTHORIZED AGENT SIGNATURE:</b>			<b>DATE:</b>
<b>Licensed Contractors Declaration:</b> 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.			
<b>CONTRACTOR SIGNATURE:</b>			<b>DATE:</b>
<b>Workers' Compensation Declaration:</b> 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, 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 <b>(this section need not be completed if the permit is for one hundred dollars (\$100.00) or less):</b>		
<b>CARRIER:</b>		<b>POLICY NUMBER:</b>	
	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.		
<b>CONTRACTOR SIGNATURE:</b>			<b>DATE:</b>
<b>WARNING:</b> 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 fees.			
	<b>Construction Lending Agency Declaration (if applicable):</b> 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 (Sec. 3097, Civ. C.).		
<b>If permit is for an Encroachment, contractor must fill in the below declaration:</b>			
	Driveway will NOT be added/alterd through the course of this project. (Skip to next section if checked)		
	Driveway will be added/alterd through the course of this project. (Complete C-12 contractor information below if checked)		
<ul style="list-style-type: none"> <li>• Only licensed contractors with a C12 license holding a Certificate of Liability Insurance, listing the City as additional insured, may work in the City's right-of-way.</li> <li>• City Liability Insurance and contractor license must be on file with the CSLT and must remain current throughout the paving season.</li> </ul>			
C-12 CONTRACTOR NAME:		PHONE:	
C-12 CONTRACTOR LICENSE #:		CSLT BUSINESS LICENSE #:	
<b>CONTRACTOR SIGNATURE:</b>			<b>DATE:</b>
<b>Property Owner Authorization - Only required if applicant is NOT owner or licensed contractor</b>			
OWNER NAME:		PHONE:	
MAILING ADDRESS:		E-MAIL:	
<b>ATTENTION PROPERTY OWNER:</b> The Building and Safety Division requires <a href="#">property owner authorization</a> for upgrades or renovations of your building. The City needs your written authorization of the proposed work prior to issuing a permit.			
APPLICANT NAME:		PHONE:	
MAILING ADDRESS:		E-MAIL:	
<b>The applicant identified on this document has my approval to submit applications and/or plans for the following upgrades or renovations</b>			
<b>OWNER(S) SIGNATURE(S):</b>			<b>DATE:</b>
<b>APPLICATION IS HEREBY MADE TO THE BUILDING OFFICIAL FOR A PERMIT SUBJECT TO THE CONDITIONS AND RESTRICTIONS SET FORTH ON THIS APPLICATION AND THE FOLLOWING:</b>			
	The City's approved plans and Permit Inspection Card <b>must remain on the job site</b> for use by City Inspection Personnel.		
	Final inspection of the work authorized by this permit is required. A <b>Certificate of Occupancy must be obtained prior to use and occupancy</b> of new buildings, structures, and remodeling work.		
I certify that I have read this application and state that the above information is correct and that I am the owner or the duly authorized agent of the owner. I agree to comply with all city and state laws relating to building construction. I hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption from the Worker's Compensation provisions of the Labor Code, I should become subject to such provisions, I will forthwith comply. In the event I do not comply with Worker Compensation Law, this permit shall be deemed revoked.			
<b>PRINT NAME(S):</b>		_____	
<b>PROPERTY OWNER(S) OR AUTHORIZED AGENT/CONTRACTOR SIGNATURE(S):</b>			<b>DATE:</b>
_____			_____
Plan review expires by time limitation and becomes null and void if the permit is not issued within 180 days from the date of plan submittal. This permit expires and becomes null and void if any work authorized by this permit is suspended or abandoned within 12 months, or if no progressive work has been verified by a City Building Inspector for a period of 12 months.			



# ONE TIME CREDIT CARD PAYMENT AUTHORIZATION FORM

*Credit Card Authorization Form may be used for immediate project intake.*

*Fees may alternatively be calculated by staff at intake. Project cannot be taken in until fees are collected. For assistance in calculating your fees prior to project submittal, please contact the Permit Center.*

ADDRESS OF PROPERTY \_\_\_\_\_

APN \_\_\_\_\_ UNIT # \_\_\_\_\_

Sign and complete this form to authorize City of South Lake Tahoe to make a one-time debit to your credit card listed below.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

### Please complete the information below:

I, \_\_\_\_\_, authorize **City of South Lake Tahoe** to charge my credit  
(full name)

card for the permit in which I am applying, on or after \_\_\_\_\_. This payment is for

(Select one):  Building Permit  Planning Permit  VHR Permit

at \_\_\_\_\_  
(Property Address)

Billing Address \_\_\_\_\_ Zip \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

CVV2 (3 digit number on back of Visa, MC, Discover; 4 digits on front of AMEX) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

**I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.**