

CITY OF CERES

APPLICATION FOR COMMERCIAL BUILDING PERMIT

2220 Magnolia Street
Ceres, CA 95307
Phone: 209-538-5753; Fax: 209-538-5675

IMPORTANT: AN INCOMPLETE APPLICATION WILL RESULT IN A DELAY IN THE ISSUANCE OF YOUR PERMIT.

APPLICATION FOR:

BUILDING _____ **PLUMBING** _____ **ELECTRICAL** _____ **MECHANICAL** _____

Job Address: _____

City: _____

Owner: _____ Address: _____

City/State/Zip: _____ Phone: _____

Email Address: _____

Contractor: _____ Address: _____

City/State/Zip: _____ Phone: _____

Contractor's License Number: _____ Class: _____ Fax: _____

Email Address: _____

Designer: _____ Address: _____

City/State/Zip: _____ Phone: _____

License Number: _____ Expiration Date: _____

Email Address: _____

Describe Work to be Done: _____

Total Valuation: \$ _____ Square Feet Total: _____

HAZARDOUS MATERIALS:

- a. After reviewing the Hazardous Material Information Sheet #3, please indicate if your project needs to comply with the applicable Hazardous Material requirements. _____ YES _____ NO
- b. If a business, is your project within 1,000 feet of the outer boundary of a school? _____ YES _____ NO

PRIOR to issuing a permit, the information listed below is REQUIRED by the Building Inspection Division unless other arrangements are made and approved by the Building Official.

Four (4) Sets of Plans	_____ YES	_____ NO
Four (4) Sets of Plot Plans	_____ YES	_____ NO
Two (2) Sets of Energy Calculations	_____ YES	_____ NO
Two (2) Sets of Truss Engineering (if used)	_____ YES	_____ NO
Two (2) Sets of Structural Calculations	_____ YES	_____ NO
Handicap Access Plans	_____ YES	_____ NO
Proof of Ownership (Owner/Builder)	_____ YES	_____ NO
Hazardous Material Questionnaire	_____ YES	_____ NO

(If you answer yes to items a, or b above)

I have carefully examined the above completed "Application for Permit(s)" and do hereby certify that all information hereon is true and correct. I further certify and agree to pay all fees associated with the processing of the "Application for Permit(s) including, but not limited to, Plan Check Fees, whether or not a permit is in fact issued.

Print Applicant's Name

Applicant's Signature

Date

CHECK ONE: OWNER: _____ YES _____ NO CONTRACTOR: _____ YES _____ NO AGENT: _____ YES _____ NO

COMMERCIAL

The following indicated items are required for a complete application:

Required

- I. City of Ceres “Application for Permit(s)”**
- II. Two (2) sets of the following:**
 - A. Energy Calculations (CF-1R, MF-1R must be blueprinted on plans)**
 - B. Soils Engineer’s Report**
 - C. Truss Engineering & Layout (must have engineer’s wet signature) if trusses are being used**
 - D. Structural Calculations (must have engineer’s wet signature)**
 - E. Stanislaus County Department of Environmental Resources**
 - 1. Environmental Health Division – if required**
 - 2. Air Pollution Control District – if required**
 - 3. Hazardous Materials Division – if required**
 - F. Ceres Planning Commission**
 - 1. Architectural Site Plan Approval – if required**
 - 2. Plan Community Development Plan – if required**
 - 3. Use Permit – if required**
 - G. Scaled plans (1/4" = 1'-0") which include the following:**
 - 1. Foundation**
 - 2. Floor Plan**
 - 3. Exterior Elevations (all views)**
 - 4. Electrical Plan**
 - a. Site Plan**
 - b. Power**
 - c. Lighting**
 - d. One-Line Power Diagram**
 - 5. Mechanical Plan**
 - 6. Plumbing Plan**
 - 7. Building Sectional Drawings (two directions)**
 - 8. Wall Sections**
 - 9. Details**
 - a. Foundation**
 - b. Framing**
 - c. Bracing (Walls and Roofs)**
 - d. Sheer Wall**
 - e. Exterior**
 - f. Roof**
 - g. _____**
 - 10. Interior Elevations**
 - 11. Energy Compliance Forms**
 - 12. Roof Plan**
 - 13. Rafter, Floor and Ceiling Joist Layout (if trusses are not being used)**
 - 14. Site Plan**
 - 15. Civil Plans – including grading**
 - 16. Window and Door Schedule**
 - 17. Landscape Plans**
 - 18. Equipment Layout and Schedule**
- III. Plan Check Fee Paid – if more than \$1,000.00 worth of work is being done**