



**CITY OF REDWOOD CITY**  
 Community Development Department  
 1017 Middlefield Road, Redwood City, CA 94063  
 Main: (650) 780-7350 • Fax: (650) 780-7348  
[permits@redwoodcity.org](mailto:permits@redwoodcity.org)

PERMIT NO: .....

**WELL PERMIT SUPPLEMENTAL FORM**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First

Mailing Address: \_\_\_\_\_  
Street Address City/State ZIP Code

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Service Address: \_\_\_\_\_  
Street Address City ZIP Code

**Please answer the following by checking the correct answer:**

- 1. Is there a well on your property? Yes  No
- 2. Is the well on your property operational? Yes  No
- 3. Is there equipment connected to your well like a pump or piping? Yes  No
- 4. Do you have the ability to use water from an adjacent creek or do you currently have hose or pumps in place to divert creek water to water your landscape? Yes  No
- 5. Is there an interconnection or can you switch between your drinking water system and the plumbing connected to your well or creek to water your landscape? Yes  No
- 6. If your well or adjacent creek runs dry or does not work, can you use City water to water your landscape through the same plumbing lines? Yes  No
- 7. Do you have an open water account? Yes  No
- 8. Are you the owner or the tenant? Owner  Tenant
- 9. Please check your preferred course of action:
  - Above Ground RP Backflow at water meter *No Exemption*       Above Ground DC Backflow at water meter Exemption
  - Non-Op. Well Annual Inspection Exemption       Below Ground DC Backflow at water meter Exemption

**CITY USE ONLY**

Meter number \_\_\_\_\_  
 Approved \_\_\_\_\_  
 Denied \_\_\_\_\_  
 Date of appointment \_\_\_\_\_  
 Time of inspection began \_\_\_\_\_  
 Time inspection ended \_\_\_\_\_  
 Inspector \_\_\_\_\_

Notes:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## **TERMS AND CONDITIONS:**

### **Below Grade Double Check Valve Exemption**

1. Double check valve type and installation must conform to City Engineering Standard Detail for Backflow Prevention Device (For Residential Use on Homes with private Well) BPD 1a
2. Below grade double check valves may only be used to meet backflow preventer installation requirements when there are no interconnections on the subject property. An interconnection is defined by the California Department of Public Health as: A physical piping connection between the onsite ground or creek water piping system and the public water piping system. This means there can be no permanent connection and there can be no temporary removable connection.
3. Reduced Pressure Principle Backflow Devices will be required above grade at properties having interconnections with ground or creek water irrigation systems. There will be no exception to this requirement.
4. Backflow devices installed below or above grade will be located as close as feasible to the water meter as determined by the City.
5. Residential property owners desiring to install the below grade double check valve must apply to the Director for such use and pay the inspection fee for an inspection by the City to determine whether the subject property qualifies.

### **Inspection in Lieu of Backflow Preventer Exemption**

1. Owners of properties on which the only auxiliary water supply is an inoperable groundwater well and on which is located no other condition that requires the installation of backflow preventers, may choose to have annual inspections and pay the associated inspection fee in lieu of installing backflow preventers on said property or destroying the well. An inoperable well is defined as a well that is without plumbing, pump or motor, whether or not such equipment is in working condition.
2. An owner desiring to choose the Inspection in Lieu of Backflow Preventer Exception shall register the subject property with the City and pay the Initial Registration Fee (Administration Fee).
3. City staff will inspect the property at least once each year during the time the annual testing would normally be performed.
4. The fee for such inspection is the Operational Testing Fee set forth herein above. Such fees shall be included as part of the property owner's municipal water bill and must be paid by the owner in the same manner as the water bill.
5. In the event the City determines that the property does not qualify for the Inspection in Lieu of Backflow Exception, the property owner shall immediately install required backflow preventers and comply in all respects with Article VII of Chapter 38 of the Redwood City Code.

# BUILDING PERMIT APPLICATION

## BUILDING & INSPECTION

1017 Middlefield Road  
Redwood City, CA 94063  
Tel: (650) 780-7350  
Fax: (650) 780-7348  
Website: www.redwoodcity.org



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

Application/Permit #: \_\_\_\_\_

Received by: \_\_\_\_\_

*Please print clearly and fill in all that apply:*

**PROJECT ADDRESS:** \_\_\_\_\_ **APN #** \_\_\_\_\_

**LICENSED CONTRACTOR 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.

Date: \_\_\_\_\_ Contractor Signature: **X** \_\_\_\_\_

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State 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 (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improve thereon, and who does the work himself or herself or through his or her own employees, provided that the 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 Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a contractor(s) licensed pursuant to the Contractors' State License Law.).

I am exempt under Sec. \_\_\_\_\_, B. & P.C. for this reason: \_\_\_\_\_

Date: \_\_\_\_\_ Owner: **X** \_\_\_\_\_

**WORKERS COMPENSATION DECLARATION:** 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:

**CARRIER:** \_\_\_\_\_ **POLICY #:** \_\_\_\_\_

(This section need not be completed if this permit is for one hundred dollars (\$100) or less.)

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.

**DATE:** \_\_\_\_\_ **APPLICANT:** **X** \_\_\_\_\_

**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 to the cost of compensation, damages as provided for in section 3706 of the Labor Code, interest, and attorney's fees.

## **CONSTRUCTION LENDING AGENCY:**

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.).

Lender's Name: \_\_\_\_\_ Lender's Address: \_\_\_\_\_

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes.

**SIGNATURE OF APPLICANT OR AGENT:** **X** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PLEASE PRINT NAME:** \_\_\_\_\_

*See reverse side*

ADDRESS: \_\_\_\_\_ BUILDING PERMIT # \_\_\_\_\_

**DESCRIPTION OF WORK:** (Please fill-in and mark all that apply)

CONSTRUCTION VALUATION: \$ \_\_\_\_\_  NONRESIDENTIAL  RESIDENTIAL

<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> ADDITION	<input type="checkbox"/> ALTERATION	<input type="checkbox"/> TERMITE/DRY ROT REPAIR	<input type="checkbox"/> DEMOLISH
<input type="checkbox"/> MOVE BUILDING	<input type="checkbox"/> FIRE SPRINKLERS	<input type="checkbox"/> SIGN	<input type="checkbox"/> FOUNDATION ONLY	<input type="checkbox"/> CHIMNEY REPAIR
<input type="checkbox"/> TENANT IMPROVEMENT	<input type="checkbox"/> SWIM. POOL/SPA	<input type="checkbox"/> FIRE REPAIR	<input type="checkbox"/> OTHER: _____	
TYPE OF CONSTRUCTION: _____ OCCUPANCY: _____ ZONE: _____ FIRE SPRINKLERS: <input type="checkbox"/> YES <input type="checkbox"/> NO				

DESCRIPTION: \_\_\_\_\_

<input type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	<input type="checkbox"/> ARCHITECT <input type="checkbox"/> DESIGNER <input type="checkbox"/> ENGINEER
NAME: _____	LICENSE /REGISTRATION #: _____
ADDRESS: _____	NAME: _____
CITY/STATE/ZIP: _____	COMPANY NAME: _____
PHONE #: _____ FAX #: _____	ADDRESS: _____
E-MAIL: _____	CITY/STATE/ZIP: _____
TENANT / COMPANY NAME: _____	PHONE #: _____ FAX: _____
E-MAIL: _____	
<i>Jurisdictions may require written approval from the owner</i>	

<input type="checkbox"/> <u>CONTRACTOR</u>	<input type="checkbox"/> <u>OWNER-BUILDER</u>
LICENSE #: _____ CLASS _____	PHONE #: _____
COMPANY NAME: _____	FAX #: _____
ADDRESS: _____	E-MAIL: _____
	CITY BUSINESS LICENSE #: _____

PROJECT CONTACT PERSON: \_\_\_\_\_  PHONE #: \_\_\_\_\_  FAX #: \_\_\_\_\_  E-MAIL: \_\_\_\_\_

**DESCRIPTION OF BUILDING:** (Please fill-in and mark all that apply)

<input type="checkbox"/> Office /Bank/Professional	<input type="checkbox"/> Single Family <input type="checkbox"/> Duplex	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Condominium	<input type="checkbox"/> Apartment Building
<input type="checkbox"/> Hotel/Motel	<input type="checkbox"/> Amusement/Recreational	<input type="checkbox"/> Industrial	<input type="checkbox"/> Service Station	<input type="checkbox"/> Medical Building
<input type="checkbox"/> Restaurant	<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Historical	<input type="checkbox"/> Educational/School	
<input type="checkbox"/> City/County Owned	<input type="checkbox"/> Church	<input type="checkbox"/> Store	<input type="checkbox"/> Other: _____	

Building Area: \_\_\_\_\_ Sq. Ft. Building Height: \_\_\_\_\_ Ft. Stories: \_\_\_\_\_

**EXISTING:** FLOOR AREA \_\_\_\_\_ GARAGE \_\_\_\_\_ OTHER \_\_\_\_\_ # UNITS \_\_\_\_\_

**PROPOSED:** FLOOR AREA \_\_\_\_\_ GARAGE \_\_\_\_\_ OTHER \_\_\_\_\_ # UNITS \_\_\_\_\_

Number of Bedrooms: \_\_\_\_\_ Number of Bathrooms: \_\_\_\_\_ Total Number of Rooms: \_\_\_\_\_

Lot Size (Sq. Ft.): \_\_\_\_\_ Lot Dimension (Front/Side/Rear): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Coverage %: \_\_\_\_\_

Setbacks: FRONT: \_\_\_\_\_ REAR: \_\_\_\_\_ LEFT: \_\_\_\_\_ RIGHT: \_\_\_\_\_

Easements: \_\_\_\_\_ Flood Zone: \_\_\_\_\_ ALUC: \_\_\_\_\_