Project Address: 1234 Seal Beach Boulevard, Seal Beach, CA 90740		PUBLIC WORKS PERMIT City of Seal Beach		Issued:		Permit Number: DPW04945
Cross St. & Notes: Seal Beach		211 8th Street Seal Beach, CA 90740		Permit Type: Plan Check		
		Tel: (562) 431-2527 ext.1317		Permit Issued by:		
Description of Work: Grading Plan Check for 1234 Seal Beach Boulevard for a Single Dwelling Unit Residential						
Owner Name, Address, Phone and Email:						
Applicant Name, Address, Phone a	and Email:					
Contractor Name and Address:						
Phone:	EMERGEN	CY:	Contractor Licer	nse: Ci	City Business License #:	
Email:			Working Days:		Expiration: 1/27/2024	
I hereby acknowledge that I have read this application and state that this is correct and agree to comply with the requirements of the permit, all City ordinances, standards, specifications, state laws, the Greenbook: Standard Specifications for Public Works Construction , latest edition, and The Watch Handbook , latest edition and the attached Standard Conditions of Approval . LICENSED CONTRACTOR'S DECLARATION I hereby affirm that I am licensed under provision of Chapter 9 (commencing with Section			CONDITIONS OF APPROVAL: 1. Call underground service alert (USA) 48 hours before starting work (800) 422-4133 2. Call Public Works Inspections 48 hours before starting work (562) 431-2527 ext. 1414 OR 1319 Special Conditions:			
7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect. License No.: , Lic. Class:			Fees			
City License No.:			Application Fee		\$198.00	
WORKER'S COMPENSATION DECLARATION I hereby affirm that I have a certificate of consent to selfinsure, or a certificate of Workers' Compensation Insurance, or a certified coy thereof (Sec. 3800, Lab. C). Policy No			Permit Fee		\$198.00	
Company		Plan Check Fee				
Certified Copy is hereby furnished Certified copy is filed with the City.		Covers up to 3 Plan Checks			\$4,298.00	
NDPES/STORMWATER QUALITY THRESHOLD DECLARATION (www.ocwatersheds.com) 1.) Soil Movement (Y/N): 2.) Uncovered Material Storage (Y/N): 3.) Cementaceous Exterior Mixing (Y/N):			Plan Archival Fee		\$89.92	
4.) Disturbed Soil =1 + Acre:(Y/N): WDID #:		Inspection Hours				
I hereby acknowledge that if any of these items has been answered in the affirmative, that I received materials and read the relevant conditions of approval from the City and I am aware of the appropriate stormwater pollution laws and there could be fines and/or other legal remedies if compliance is not obtained.			Total Collected		\$4,783.92	
X-Sign and Date(Aut	horized Agent))	Receipt #			
Requires a 10% Bond			Return Deposit To:			
			Applicant Owner Contractor			
			Route To:			
			Applicant Inspector Finance			
			Engineering			