



**F. Declaration Regarding 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 (Section 3097, Civil Code).

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

**G. Declaration by Construction Permit Applicant:** By my signature below, I certify, under penalty of perjury, to each of the following:

- I am  a California licensed contractor or  authorized to act on the Contractor's behalf\*\*
- I have read this construction permit application and the information I have provided is correct.
- I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

Applicant's Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**I authorize representatives of the City of Rancho Cordova to enter the above-identified property for inspection purposes**

\_\_\_\_\_  
**California Licensed Contractor or Authorized Agent\*\* Signature**

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

*\*\*requires separate authorization form*

**Staff Verification of Applicant Authorization:**

Fax Permits are accepted for **incidental RESIDENTIAL permits only**, such as re-roof, water heater change-outs, HVAC replacements (like-for-like), electric panel change-outs, sewer replacements, etc.

**CONTRACTOR PERSONNEL / PERMIT FACILITATORS:** To submit permits by fax, these types of applicants must first have a Letter of Authorization on file with the Building & Safety Division. This will require that the applicant bring in a notarized Letter of Authorization, on company letterhead, signed by a principal of the company, *prior* to applying by fax. After submitting this letter, the applicant named on the Letter of Authorization will be able to sign any pertinent permit-related documents, and the Building & Safety Division will process the Fax Permit Application. Multiple employees may be included on the Letter of Authorization. The Letter of Authorization must be updated every calendar year, or as new employees are added or removed by the applicant company.

**OWNER-BUILDERS / AGENTS FOR OWNER:** Property owners who wish to use the Fax Permit application must complete the Fax Permit Application, and the Notice to Property Owner form (RCB0827). Upon issuance of the permit, the property owner must provide proof of identity to the satisfaction of the Building & Safety Division. This may be in the form of a valid Driver's License or other State or Federal issued identification that may be used to verify the property owner's signature. If the property owner is having the fax permit picked up by an intermediary (such as a permit facilitator), then the property owner must complete the Authorization of Agent to Act on Property Owner's Behalf section of the Notice to Property Owner form (RCB0827), and that individual will need to present a copy of the property owner's identification for property owner's signature verification.



# CITY OF RANCHO CORDOVA DEPARTMENT OF FINANCE

2729 Prospect Park Drive, Rancho Cordova, California 95670  
916 851-8768 or 916 851-8700  
businesslicense@cityofranhocordova.org

## REQUEST FOR PAYMENT BY CREDIT CARD

THE CITY OF RANCHO CORDOVA ACCEPTS THE FOLLOWING CARDS:



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

I, \_\_\_\_\_ Authorize the City of Rancho Cordova to  
charge the amount of \$ \_\_\_\_\_ as payment for the following departmental fees.

Please check the appropriate box and describe the fee being paid

<input checked="" type="checkbox"/>	<b>Building &amp; Safety Division Permit Fees</b>
<input type="checkbox"/>	Room Rentals
<input type="checkbox"/>	Public Works
<input type="checkbox"/>	Planning
<input type="checkbox"/>	Finance
<input type="checkbox"/>	Other

CARD NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_

3 DIGIT SECURITY CODE: \_\_\_\_\_

BILLING ZIP CODE: \_\_\_\_\_

NAME OF CARDHOLDER: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

SIGNATURE OF CARDHOLDER OR AGENT: \_\_\_\_\_

PRINTED NAME OF SIGNEE: \_\_\_\_\_

**Please complete this form and fax it to (916)851-8762 with the Fax Permit application**