



City of Patterson
 1 PLAZA
 PO Box 667
 Patterson, CA 95363
 (209) 895-8030 Fax (209) 895-8039

Office Use Only

Application Date: _____

Customer # _____

PERMIT # _____

WMP to P.W. _____

Enchroachment Permit: _____

APPLICATION FOR SWIMMING POOL

Project Valuation: \$ _____

Building Type: Residential Commercial

Pool Description: _____

Heater: _____ Spa: _____ Electrical: _____ Decking: _____ Inground: _____ Above ground: _____

Address of Work: _____ Patterson, CA 95363

Is Property in a SFHA (Special Flood Hazard Area)? _____

Owner: _____ APN: _____

Address: _____ Phone: _____

City: _____ Zip: _____ Email: _____

Primary Contractor: _____ Phone: _____

Address: _____ Contractor Lic #: _____ Local Lic# _____

City: _____ Zip: _____ Email: _____

Applicant: _____ Date: _____

Applicant Address: _____ Phone: _____

Project Contact Person: _____ Phone: _____

Print Name and Title

Fax: _____ Email: _____

PLEASE REVIEW THE FOLLOWING ITEMS PRIOR TO SUBMITTING APPLICATION

1. **Residential Projects:** 4 sets of plans & 2 sets of all supporting documents (i.e. Structural Calcs, Energy Calcs, Truss Calcs, etc) are required.
2. **Commercial Projects:** 4 sets of plans, 3 sets for Structural Calcs, and 2 sets of all other supporting documents (i.e. Energy Calcs, truss Calcs, etc.) are required.
3. A plan check deposit maybe required with this application.
4. This application, in which no permit is issued, will expire in 6 months from today's (submittal) date.
5. If this building is intended to be licensed by Dept of Health Services (i.e. OSHPD3), you are required to submit concurrently to OSHPD for their review and approval.
6. No inspection will be performed prior to issuance of the Building Permit.

APPLICANT SIGNATURE

DATE

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 that my contractor's license is in full force and effect and that all of the information provided by me regarding this is true and correct. I also affirm under penalty of perjury that my Worker's Compensation Declaration or Certificate of Exemption from Worker's Compensation Insurance and lend agency information are true and correct.

Signed _____ Dated _____
Print Name of Signer _____
License# _____ License Class _____

WORKER'S COMPENSATION DECLARATIONS

I hereby affirm that I have a certificate of self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3000, Lab. C).

Policy# _____ Company _____
 Certified copy is hereby furnished
 Certified copy is filed with the building inspection department of the City of Patterson
Applicant Signature _____ Dated _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from provisions of the Contractor's License Law (Chapter 9 of Division 3 of the Business and Profession Code) because: (check applicable statement)

- A. I am the owner of the above property and I will contract to have all of the work performed by licensed contractors.
- B. I am the owner of the property and the work will be partially accomplished in accordance with Statement "A" and the other work will be accomplished in accordance with Statement "C".
- C. I am the owner of the above property and I will perform all the above work personally or through my employees whose sole compensation will be wages, and the above described structure is not intended or offered for sale.

Applicant Signature _____ Dated _____
Print Name of Signer _____

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

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 Worker's Compensation Laws of California.

Applicant Signature _____ Dated _____

NOTICE TO APPLICANT: If after making this Certificate of Exemption you should become subject to the Worker's Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Cir. 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 CITY TO ENTER THE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

Applicant or Agent Signature _____ Date: _____

Swimming Pool Barrier Requirements

The requirements listed below are for permits issued after January 1, 2018 for new swimming pools, pool repairs, or pool alterations located at a single-family home.

When a building permit is issued for the construction of a new swimming pool or spa or the remodeling of an existing swimming pool or spa at a private single-family home, the respective swimming pool or spa, (except as provided in H&S Section 115925), shall be enclosed by perimeter fencing per CBC section 3109.4, **AND** shall be equipped with at least **TWO** of the following seven drowning prevention safety features:

1. An enclosure that meets the requirements of H&S Section 115923 / CBC 3109.4.4.3 and **isolates** the swimming pool or spa from the private single-family home.
2. Removable mesh fencing that meets American Society for Testing and Materials (ASTM) Specifications F2286 standards in conjunction with a gate that is self-closing and self-latching and can accommodate a key lockable device.
3. An approved safety pool cover, as defined in subdivision (d) of H&S Section 115921.
4. Exit alarms on the private single-family home's doors that provide direct access to the swimming pool or spa. The exit alarm may cause either an alarm noise or a verbal warning, such as a repeating notification that "the door to the pool is open."
5. A self-closing, self-latching device with a release mechanism placed no lower than 54 inches above the floor on the private single-family home's doors providing direct access to the swimming pool or spa.
6. An alarm that, when placed in a swimming pool or spa, will sound upon detection of accidental or unauthorized entrance into the water. The alarm shall meet and be independently certified to the ASTM Standard F2208 "Standard Safety Specification for Residential Pool Alarms," which includes surface motion, pressure, sonar, laser, and infrared type alarms. *A swimming protection alarm feature designed for individual use, including an alarm attached to a child that sounds when the child exceeds a certain distance or becomes submerged in water, is not a qualifying drowning prevention safety feature.*
7. Other means of protection, if the degree of protection afforded is equal to or greater than that afforded by any of the features set forth above and has been independently verified by an approved testing laboratory as meeting standards for those features established by the ASTM or the American Society of Mechanical Engineers (ASME).

Before the issuance of a final approval for the completion of permitted construction or remodeling work, the local building code official shall inspect the drowning safety prevention features required by this section and, if no violations are found, shall give final approval.

General Information- "Swimming pool" or "pool" means any structure intended for swimming or recreational bathing that contains water over 18 inches deep. "Swimming pool" includes in ground and above ground structures and includes, but not limited to, hot tubs, spas, portable spas, and non-portable wading pools.

Swimming Pool Barrier Acknowledgement Form

Permit Number: _____ Project Address: _____

I (We) acknowledge that a new swimming pool or spa or the remodeling of an existing swimming pool or spa at a private single-family home, the respective swimming pool or spa, (except as provided in H&S Section 115925), shall be enclosed by perimeter fencing per CBC section 3109.4, **AND** shall be equipped with at least **TWO** of the following seven drowning prevention safety features:

PLEASE INITIAL TWO OF THE FOLLOWING:

1. _____ An enclosure that meets the requirements of H&S Section 115923 / CBC 3109.4.4.3 and **isolates** the swimming pool or spa from the private single-family home.
2. _____ Removable mesh fencing that meets American Society for Testing and Materials (ASTM) Specifications F2286 standards in conjunction with a gate that is self-closing and self-latching and can accommodate a key lockable device.
3. _____ An approved safety pool cover, as defined in subdivision (d) of H&S Section 115921.
4. _____ Exit alarms on the private single-family home's doors that provide direct access to the swimming pool or spa. The exit alarm may cause either an alarm noise or a verbal warning, such as a repeating notification that "the door to the pool is open."
5. _____ A self-closing, self-latching device with a release mechanism placed no lower than 54 inches above the floor on the private single-family home's doors providing direct access to the swimming pool or spa.
6. _____ An alarm that, when placed in a swimming pool or spa, will sound upon detection of accidental or unauthorized entrance into the water. The alarm shall meet and be independently certified to the ASTM Standard F2208 "Standard Safety Specification for Residential Pool Alarms," which includes surface motion, pressure, sonar, laser, and infrared type alarms. *A swimming protection alarm feature designed for individual use, including an alarm attached to a child that sounds when the child exceeds a certain distance or becomes submerged in water, is not a qualifying drowning prevention safety feature.*
7. _____ Other means of protection, if the degree of protection afforded is equal to or greater than that afforded by any of the features set forth above and has been independently verified by an approved testing laboratory as meeting standards for those features established by the ASTM or the American Society of Mechanical Engineers (ASME). **Provide type of protection with form.**

I understand that not having two of the above initialed drowning prevention safety features installed at the time of the Pre-Plaster inspection will constitute a violation of **California Health and Safety Code - The Swimming Pool Safety Act [115920 - 115929]**.

Acknowledgement:

Contractor Signature Date

Owner Signature Date

Contractor Name (Please Print)

Owner Name (Please Print)



Encroachment Permit

Application Date Permit # Expiration Date

Description of Work:

Job Location:

WILL THIS REQUIRE GRADING ACTIVITIES? (ANYTHING 50 CY AND ABOVE): Yes No
****IF YES, PLEASE CONTACT THE CITY'S ENGINEERING DEPARTMENT TO OBTAIN A GRADING PERMIT (209) 895-8074.**

WILL THE ACTIVITIES BEING PERFORMED DISTURB SOIL?: Yes No
PROJECT SIZE: _____ SQ. FT. _____ ACRE(S)

IS THIS A NEW DEVELOPMENT PROJECT? IF SO, WAS A STORMWATER POLLUTION PREVENTION PLAN (SWPPP) SUBMITTED TO THE CITY: Yes No **IF A SWPPP PLAN WAS COMPLETED, PLEASE PROVIDE WDI#: _____**
NAME OF LEGAL RESPONSIBLE PERSON (LRP): _____

***NOTE: EROSION & SEDIMENT CONTROL PLANS (ESCP) ARE REQUIRED BY STATE / LOCAL STORMWATER REGULATIONS AND IT APPLIES ONLY TO PROJECTS THAT DISTURB SOIL AND GO THROUGH PLAN CHECK/PERMIT PROCESS. THIS DOES NOT APPLY TO MAINTENANCE PROJECTS.**

Permit Type:	Permit Purpose: <input type="checkbox"/> Install <input type="checkbox"/> Repair <input type="checkbox"/> Replace <input type="checkbox"/> Abandon	Other Fees
	\$98.82 <input type="checkbox"/> Curb Cut, Excavation, Trench <input type="checkbox"/> Sewer Connection <input type="checkbox"/> Driveway Approach <input type="checkbox"/> Water Connection <input type="checkbox"/> Install/Remove Monitoring Well <input type="checkbox"/> Install Groundwater Well	\$71.31 <input type="checkbox"/> Street Cut/Excavation/Trench <input type="checkbox"/> Tree Work <input type="checkbox"/> Street Painting <input type="checkbox"/> Other (Write in Below) <input type="checkbox"/> Swimming Pool

Other

Job Location Work Scheduled to Begin and Completed by

Property Owner Contact Person

Phone/Cell: E-mail:

Property Owner's Address City State Zip Code

Contractor's Name Contact Person:

Contractor's Address City State Zip Code

Phone/Cell: E-mail:

City Business License # State Contractor Lic. Class

SUBCONTRACTOR'S LIST (SUBS MUST HAVE A CITY BUSINESS LICENSE)

No.	Name	Address	Work to be Performed for General Contractor	City Business License #	Contractor's State License & Class
1.					
2.					



Encroachment Permit

TO BE COMPLETED BY CITY PERSONNEL

CONDITIONS OF CITY APPROVAL

1. Call Underground Service Alert (U.S.A.) @ 1-800-642-2444 at least 48 hours **BEFORE** digging in City right-of-way.
2. Shoring is required for trenches 5 feet or deeper.
3. All work, including Compaction, shall be completed to current City standards.
4. Any damage to public or private property or any damage to facilities in public right-of-way is the responsibility of the contractor to correct.
5. If the scope of work results in any significant impact to existing homes or businesses, the contractor may be required to pass out fliers to that effect.
6. A Pre-Construction meeting may be needed as determined by Public Works. **Please contact Public Works at (209) 895-8060 to schedule if marked Yes.** Yes No
7. If any water is needed from City fire hydrants, a Hydrant Use Permit is required.
8. All work performed under this permit shall comply with the Phase II Storm water Regulations and the City's storm water ordinance, including the completion of a SWPPP and/or Erosion Sediment Control Plan (ESCP). BMPs must be in place and the City's QSP will inspect before starting any work.
 Is a SWPPP and/or ESCP required for this project? Yes No
9. Upon approval of this application, a Fee is due before work may be commenced.
10. Is a traffic control plan needed? (Any jobs that encroach on city streets, including partial blockage or closure of streets, will require a traffic control plan and a designated date work will begin. Upon approval of encroachment permits, emergency services shall be notified and give the date work will begin.)
11. Is the property free and clear of easements? Yes No
12. Pre-Inspections and Post Inspections are required for all Encroachment Permits. Please contact the Public Works Department at **(209) 895-8060** to schedule your inspections.

13. Other:

14. Has the Pre-Construction Meeting Completed? Yes No Date of Meeting: _____

John Vance, Public Works Inspector		
	Signature	Date
Robert Andrade-Deputy Director		
	Signature	Date



City of Patterson

Public Works Department
 Storm Water Management Program
 1 Plaza, 2nd Floor
 P.O. Box 667
 Patterson, California 95363
 Phone (209) 895-8064

Erosion and Sediment Control Plan (ESCP)

Worksheet for Small Construction Projects (Disturbing Soil + Plan Check/Permit)

What is this document for?

The City's Phase II MS4 NPDES General Permit issued by the State Water Board requires the City to develop and maintain a program to assure that sediment and other pollutants from construction activities do not flow into the City's storm water drainage system and, subsequently, impact local receiving waters. The City's Permit requires the City to require the owner of any construction project having soil disturbance to submit an Erosion and Sediment Control Plan (ESCP). The ESCP must identify potential sources of erosion and sedimentation associated with the project and identify the control measures (best management practices or BMPs) used to prevent erosion and control sedimentation within the project. This document is a worksheet to assist owners of small projects to determine appropriate control measures for their project.

Who is required to complete this document?

All construction projects that have soil disturbance and pass through plan check or the City's permitting process must develop an ESCP. Projects having more than one (1) acre of soil disturbance or those projects that are part of a larger common plan may be required to comply with the State Water Board's Construction General Permit (CGP), which requires the development of a Storm Water Pollution Prevention Plan (SWPPP). For these larger projects, the CGP-required SWPPP may be submitted in lieu of the ESCP. For all other projects (small projects) having less than one (1) acre of soil disturbance or those that qualify for a waiver or exemption from the CGP, must submit an ESCP using this worksheet.

What is required in this document?

This worksheet requires basic project and contact information, as well as, basic site information including location, status, approximate start and end dates and the area of soil disturbance.

The Best Management Practices (BMPs) that will be used during construction are also required to be identified.

A basic site map showing the project boundaries, adjacent streets, storm drain inlets, placement of BMPs, and where construction work will be occurring is required to be included.

BMPs, as defined on the EPA's website, are "a term used to describe a type of water pollution control. Storm water BMPs are techniques, measures or structural controls used to manage the quantity and improve the quality of storm water runoff. The goal is to reduce or eliminate the contaminants collected by storm water as it moves into streams and rivers."

For more details on BMPs please visit the California Storm Water Quality Association's website at: www.cswqa.org/pubs/guides/bmpdb.html

Or Caltrans's website at: www.dot.ca.gov/hq/contract/stormwater/manuals.htm

Project Information

Project Name:			
Project Address:			
Project Size: (Indicate sq. ft. or acres)			
Anticipated Construction Start Date:			Anticipated Construction End Date:
Approximate Soil Disturbance: (Indicate sq. ft. or acres)			Number of Storm Drain Inlets within 50 ft. of the soil disturbance:

Owner Information

Name:			
Address:			
Phone Number:			
Email:			



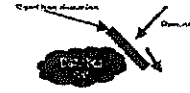
Contractor Information

Name:	
Company Name:	
Address:	
Phone Number:	Email:

Best Management Practices

Run-On Control BMPs

When surface flow of storm water runoff is allowed to pass through disturbed soils at an active construction project it can mobilize sediment and carry it into the municipality's storm drainage system and into the local receiving waters. This results in deposition of sediment in the municipal drainage system which causes more frequent maintenance and can cause flooding. The sediment is also harmful to the local waterways.



Does storm water have the potential to run-on to the construction site?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, will storm water surface flow be diverted around any disturbed soil areas? Show how it will be diverted on the site map.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Erosion Control BMPs

The definition of erosion is the detachment of soil particles. These particles can become detached by rain, wind, or construction activity. Although construction, by nature, disturbs soil, it is vital to place a temporary or permanent covering over disturbed soil as soon as possible. Projects are not allowed to leave areas of exposed soil that do not have a cover. On the table below and on the site map show how you will prevent erosion at your project.

CASQA Fact Sheet	BMP Name	BMP Selected? (Check Box)	Describe the BMP to be implemented. If not used, state the reason why.
EC-1	Scheduling (work will be conducted during the dry season)		
EC-2	Preservation of Existing Vegetation (existing vegetated areas will not be disturbed)		
EC-4	Area to be vegetated with landscaping, turf, or hydroseeding		
EC-7	Temporary Erosion Control using an erosion control blanket or geotextile		
EC-5 & EC-8	Area covered with a temporary or permanent mulch including straw, wood, compost, hydromulch, or equivalent		
EC-16	Non-Vegetated Stabilization (covered with aggregate, paving, permanent structures / surfaces)		
WE-1	Wind Erosion Control (kept moist to prevent wind erosion)		

Temporary Sediment Control BMPs

Sediment control is accomplished by two ways. First, giving sediment every opportunity to settle out of storm water runoff while still on the project. Second, remove sediment from surfaces that has been carried or tracked off site before it enters the municipal drains. Each project must have effective perimeter sediment control. Drain inlets within 50 feet of the project must be protected. Any visible track out or sedimentation onto municipal property must be removed as soon as possible. Using the table below and the attached site map to show how you will control sediment at the project site.

CASQA Fact Sheet	BMP Name	BMP Selected? (Check Box)	Describe the BMP to be implemented. If not used, state the reason why.
SE-1	Temporary Silt Fence		
SE-2 or SE-3	Sediment basin or trap (all or some of the storm water drains to a retention pond or basin where sediment can settle out)		
SE-5	Temporary Fiber Rolls / Straw Wattles		
SE-6 or SE-8	Temporary Gravel Bag Berm or Sand Bag Barrier		

SE-7	Street Sweeping (inspect roads and sidewalks daily and sweep as necessary)		
MS4 Standard	Curb cutback (maintain a minimum of 4 inches of elevation difference between the disturbed soil and the top of the existing curb, sidewalk, or paved surface)		
SE-10	Temporary Drain Inlet Protection (mandatory for any DI's within 50 feet of the project)		
SE-13	Compost Socks / Biofilter Bags		
MS4 Standard	Stabilized Construction Exit – Constructed with aggregate at the project owner's specification, but it must be effective in controlling trackout.		
TC-2	Stabilized Construction Roadways		
WM-03	Stockpile Management (stockpiles that have not been actively used in the last 14 days must be covered with an erosion control blanket or plastic sheeting and contained with a fiber roll or gravel bag berm)		

Non-Storm Water Pollution Control BMPs

The City ordinance (No. 777) prohibit the discharge to its municipal drainage system of any wash water, unpermitted construction site dewatering, saw-cutting or grinding slurries, unpermitted hydro-test water, chlorinated swimming pool or fountain water, concrete or paint wash out, or spills of hazardous materials or other substances. On the table below, list any activities that may apply to your project and show the location of these activities on the site map.

CASQA Fact Sheet	BMP Name	Activity Planned? (Yes/No)	Describe the BMP to be implemented. If not used, state the reason why.
NS-3	Paving, Sealing, Saw-cutting, Coring, and Grinding Operations		
NS-7	Potable Water / Irrigation Testing and Discharge to the Municipal Drainage System		
NS-8	Vehicle and Equipment Cleaning Performed on Site		
NS-9 & WM-04	Vehicle and Equipment Fueling Performed on Site		
NS-10	Vehicle and Equipment Maintenance Performed on Site		
NS-12/13 & WM-08	Concrete, Stucco, Plaster, Tile, or Masonry Work		
WM-09	Temporary Sanitary Waste Facilities (port-a-potties)		
WM-01	Storage of Hazardous Materials on the Project Site (paints, solvents, acids, fuel, lubricants, etc.)		

"This Stormwater Erosion and Sediment Control Plan (ESCP) and attachments were prepared for my project and under my direction to meet the Local and State Requirements. By signing below, I understand that my project must implement Best Management Practices (BMPs) and understand that the City will monitor, inspect, and enforce Stormwater regulations on my project site."

Project Owner Signature

Date

For questions or to schedule a Stormwater Compliance Inspection, please contact Sonia Delgado, Public Works, at (209) 895-8064 or via e-mail at sdelgado@ci.patterson.ca.us

For City Use Only

Date ESCP Received by City: _____
 Name of Staff Receiving ESCP: _____
 Plan Reviewed by: _____ Date Reviewed: _____
 Pre-Soil Disturbance Inspection Date: _____
 During Construction Inspection Date(s): _____ During Construction Inspection(s): _____
 Post Construction Inspection Date: _____

Site Map (draw map below or attach another map) – Map can be hand drawn or Parcel Map with Markups.
Please include a Map Legend for BMPs/Symbols and to utilize a North Arrow below to show direction(s).

