# CITY OF ESCALON

DEVELOPMENT SERVICES

2060 McHenry Avenue ▪ Escalon, California 95320 ▪ Office 209.691.7430 Fax 209.691.7439 ▪ Email devservices@cityofescalon.org

## Swimming Pool Permit Application - Contractor

### Project Information

Property Location (Street Address): _____ Lot, Bldg, Ste#: _____

Parcel # _____ -_____ -_____ Building Sq.Ft: _____ Garage Sq.Ft: _____

Project Valuation (to include all labor & materials): $_____

| | | | | |
|---|---|---|---|---|
| Building Type: | ☐ Commercial | ☐ Industrial | ☐ Residential | ☐ Other |
| Construction Type: | ☐ New Construction | ☐ Addition | ☐ Remodel | ☐ Other |
| Permit Type: | ☐ Building | ☐ Mechanical | ☐ Plumbing | ☐ Electrical |

**Detailed Description of Work:** _____

_____

### Property Owner Information

Property Owner Name: _____ Phone #: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

### Licensed Professional Information

Contractor: _____ Phone #: _____

Contractor License #: _____ Class: _____ Cell #: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

### Department Use Only: Approval Required from Planning Department

Setbacks: Front: _____ Side: _____ Rear: _____

Comments: _____

Approved by: _____ Date: _____

I understand that a letter of authorization from the contractor is required if the applicant is not the license holder. This letter must be on company letterhead and submitted before the application can be processed. You may submit the letter in person, via fax, or via e-mail.

☐ I am ***OWNER*** (no letter needed) ☐ I am ***CONTRACTOR*** (no letter needed) ☐ I am ***AUTHORIZED AGENT*** (must provide authorization letter)

**By my signature below, I certify to each of the following statements:**

I am the property owner or authorized to act on the property owner's behalf. I have read this application and the information I have provided is correct. I agree to comply with all applicable City and County ordinance, rules, regulations, and State laws relating to building construction, and with any and all agents, and employees from any and all claims and liability for personal injury, including death, and property damage caused by, arising out of, or in any way connected with the issuance of this permit. I authorize representatives of the City of Escalon to enter the above mentioned property for inspection purposes.

**Contractor, Property Owner or Authorized Agent's Signature:** _____

**Print Name:** **Date:**

OFFICIAL USE

Date Received: _____

Permit #: _____

Deposit Amnt: _____

Comments: _____

_____

_____

_____

_____

## 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 Professionals 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.

State of California Contractor's License #: _____ Class: _____ Expiration Date: _____

City of Escalon Business License #: _____ Expiration Date: _____

Contractor or Authorized Agent's Signature: _____

## Worker's Compensation Declaration

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 _____

Expiration Date_____ Applicant Signature _____

## 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'sAddress_____

## Owner – Builder Declaration

I hereby affirm under penalty of perjury that I am exempt from provisions of Chapter 9, Division 3, B&D Code of the Contractor's License Law because (check applicable statements)

- ◯ 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_____

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_____ Dated_____

# CITY OF ESCALON
# STORM WATER POLLUTION PREVENTION ACKNOWLEDGEMENT

## THIS SHEET MUST BE INCLUDED WITH ALL BUILDING PERMIT APPLICATIONS

| Storm Water Pollution Prevention Contact Information | | |
|---|---|---|
| Contact Name: | | |
| Contact Phone Number: | Project Start Date | Anticipated Completion Date |

| Site Information | |
|---|---|
| Project Square Footage: | Assessor's Parcel Number: |
| Project Area of Disturbance: | Type of Construction: |
| Project Address: | |

| Water Quality | |
|---|---|
| Location in Respect to Water Bodies listed on the 303(d) List/305(b) Report:<br>All projects within City limits are at least 13 miles from Lone Tree Creek, 32 miles from French Camp Slough, and 33 miles from the San Joaquin River. | Project threat to water quality: (check one)<br>☐ NONE<br>☐ LOW<br>☐ HIGH |

| Acknowledgement |
|---|
| All work performed under this permit shall comply the National Pollutant Discharge Elimination System (NPDES) storm water regulations adopted by the US Environmental Protection Agency, and the Phase II Small Municipal Separate Storm Sewer System ( MS4) General Permit requirements.<br><br>SIGNATURE: DATE: |
| NAME (PRINT) |

OFFICE USE ONLY

RECEIVED BY: _____ DATE:_____

BUILDING PERMIT NO.: _____

[Forward one copy to Public Works Department with approved Building Permit attached.]

# CITY OF ESCALON
# STORM WATER POLLUTION PREVENTION ACKNOWLEDGEMENT

All construction projects within the City of Escalon are required to comply with the National Pollutant Discharge Elimination System (NPDES) storm water regulations adopted by the US Environmental Protection Agency, and the Phase II Small Municipal Separate Storm Sewer System ( MS4) General Permit requirements regardless of size.

**PROJECT SIZE = LESS THAN 1 ACRE**

A Storm Water Pollution Prevention Acknowledgment form must be included with your Building Permit Package. Minimum requirements for this size project include implementing, monitoring and maintaining effective Best Management Practices (BMP's). In addition to the City's standard inspection schedule, inspections for compliance shall be at conducted once a week during the rainy season and/or pre-rain, and and/or post-rain, and/or complaint driven.

The City shall enforce compliance at all times.

For information on BMP's: http://www.dot.ca.gov/hq/construc/stormwater/CSBMPM_303_Final.pdf

**PROJECT SIZE = 1 ACRE (43,560 SQ. FT.) OR MORE**

A Storm Water Pollution Prevention Plan (SWPPP) must be submitted along with your construction plans, for review, if project is disturbing 1 acre or more of land. Multiple projects less than 1 acre but part of a larger development shall be included in this category.

Prior to commencement of construction activities, an Owner/Builder must electronically file the following Permit Registration Documents (PRDs) with the State Water Resources Control Board:

- Notice of Intent
- Risk Assessment
- Site Map
- SWPPP
- Annual Fee
- Signed Certification Statement

To file with the State, log on to https://smarts.waterboards.ca.gov

Submit a copy of the NOI & WDID number to the City.

Schedule an Onsite SWPPP Inspection once all BMP's have been installed.

SWPPP inspections will be conducted once a week during the rainy season and/or pre-rain, and and/or post-rain, and/or complaint driven. Twice a month during the dry season or as needed.

Prior to submitting your Notice of Termination (NOT) to the State, the City must perform the final SWPPP inspection and provide a letter stating that the site is in compliance. Copies of the NOT must be sent to the City when obtained.

The City shall enforce SWPPP compliance at all times. Additional information regarding the Storm Water Management Program can be found at:

http://www.waterboards.ca.gov/water_issues/programs/stormwater/municipal.shtml

# CITY OF ESCALON

Building Department

**APPLICANT/PROPERTY OWNER IDENTIFICATION OF SELECTED DROWNING PROTECTION SAFETY FEATURES FOR SWIMMING POOLS & SPAS AT PRIVATE SINGLE FAMILY HOMES**

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, a barrier or fence, (see Health and Safety Code 115923 on reverse) shall isolate the swimming pool or spa from **NEIGHBORING PROPERTIES** and the respective swimming pool or spa shall be equipped with at least **TWO** of the following seven drowning prevention safety features:

**Please identify two safety features for the required pool barrier:**

1 _____ An enclosure that meets the requirements of Section 115923 (see reverse) 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 that is manually or power-operated that meets all of the performance standards of the American Society for Testing and Materials (ASTM) in compliance with standard F1356-91.

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). Other means of protection is subject to approval by the Building Official on a case-by case basis.

**NOTE:**

- **ITEMS 3 AND 6 AND ITEMS 4 AND 5 CANNOT BE USED TOGETHER.**

**California Building Code, Section 115923 An enclosure shall have all of the following characteristics:**

(a) Any access gates through the enclosure open away from the swimming pool and are self-closing with a self-latching device placed no lower than 60 inches above the ground. (VEHICLE GATES WILL NOT MEET THIS REQUIREMENT)

(b) A minimum height of 60 inches.

(c) A maximum vertical clearance from the ground to the bottom of the enclosure of 2 inches

(d) Gaps or voids, if any, do not allow passage of a sphere equal to or greater than 4 inches in diameter.

(e) An outside surface free of protrusions, cavities or other physical characteristics that would serve as handholds or footholds that could enable a child below the age of five years to climb over.

**THE FOLLOWING ENCLOSURE TYPES WILL MEET THE REQUIREMENT OF ITEM (e) ABOVE:**

1) Solid wood or similar material fence with vertical or horizontal pickets tightly spaced together. Horizontal rails installed on the opposite side of the fence from the pool shall be spaced so the top of the supports are no less than 45" apart.
2) Rod iron or metal tubing fence with vertical members spaced no more than 4" apart with the top of the horizontal supports no less than 45" apart.
3) Chain link fencing, minimum 11 gage with or without slats with a maximum horizontal opening of 1 ¾". (maximum 1 ¼" spacing measured perpendicular wire to wire)
4) Block or concrete wall having no protrusions that would serve as handholds or footholds. A BLOCK OR CONCRETE WALL WILL REQUIRE A SEPARATE BUILDING PERMIT.

Other barrier/fence installations will be subject to approval by the Building Official on a case-by case basis.

**PROJECT INFORMATION**

**Building Permit #**_____

**Project Address:**_____

**Contractors Signature:**_____ **Date:**_____

**Property Owner Signature:**_____ **Date:**_____

# POOL AND SPA HEATING SYSTEMS



| CERTIFICATE OF INSTALLATION | | CF2R-PLB-03-E |
|---|---|---|
| Pool And Spa Heating Systems - For Non-HERS Registered Projects | | (Page 1 of 3) |
| Project Name: | Enforcement Agency: | Permit Number: |
| Dwelling Address: | City: | Zip Code: |

| **A. Pool and Spa System Type** | | |
|---|---|---|
| 01 | Pool and Spa System Type | |

| **B. Pool and Spa Systems and Equipment Requirements** (Section 110.4(a) and 110.5) | |
|---|---|
| 01 | Heater has a thermal efficiency that complies with the Appliance Efficiency Regulations. |
| 02 | A readily accessible on-off switch is mounted on the outside of the heater, which allows the heater to be shut off without the user adjusting the thermostat setting. |
| 03 | A weatherproof plate or card containing instructions for the energy-efficient operation of the pool or spa heater is permanently mounted. |
| 04 | No electric resistance heating except for listed package units that have fully insulated enclosures and tight fitting covers that are insulated to at least R-6. Or if documentation is provided that at least 60% of the annual heating energy is from site solar energy or recovered energy. |
| 05 | Heating system has no pilot light. |
| **The responsible person's signature on this compliance document affirms that all applicable requirements in this table have been met.** | |

| **C. Pool and Spa System Installation Requirements** (Section 110.4(b)) | |
|---|---|
| 01 | To allow for the future addition of solar heating equipment, at least 36" of pipe is installed between the filter and heater, or dedicated suction and return lines are installed, or built-in, or built-up, connections for future solar heating are provided. |
| 02 | A cover is provided for outdoor pools or spas that have a heat pump or gas heater. |
| 03 | Pool system has directional inlets to adequately mix the pool water. |
| 04 | Pool system has a time switch that allows the pump to be set or programmed to run during off-peak periods only. |
| **The responsible person's signature on this compliance document affirms that all applicable requirements in this table have been met.** | |

| CERTIFICATE OF INSTALLATION | | CF2R-PLB-03-E |
|---|---|---|
| Pool And Spa Heating Systems - For Non-HERS Registered Projects | | (Page 2 of 3) |
| Project Name: | Enforcement Agency: | Permit Number: |
| Dwelling Address: | City: | Zip Code: |

| **D. Pool Pump Sizing and Flow Rate Specification** (Section 150.0(p)) | | |
|---|---|---|
| 01 | The pool pump specified is listed in the CEC database of certified pool pumps. | |
| 02 | The pool pump flow rate shall not exceed the maximum pump flow rate calculated based on pool sizing in the table below. The return pipe diameter, suction pipe diameter, and filter area shall be at least as large as the required minimums shown in the table.<br>Alternatively, a flow calculation or flow test result shall be provided to demonstrate that the pump flow rate is less than 6 hour filtration turnover, and the return pipe flow rate does not exceed 8 fps and that the suction pipe flow rate does not exceed 6 fps. | |
| 03 | An alternative compliance calculation or a flow test result is provided for this pool or spa use<br>(must attach flow calculation or flow test result to this form) | |
| 04 | The pump is capable of operating at 2 or more speeds (not applicable if pump is less than 1 horsepower). | |
| 05 | Each auxiliary pool load is served by either a separate pump, or the system is served by a multi-speed pump. | |
| 06 | Volume of Pool (gallons) | |
| 07 | Filter Type (Cartridge, Sand, DE) | |

| 08a<br>Required Min Return Pipe Diameter (inches) | 08b<br>Required Min Suction Pipe Diameter (inches) | 08c<br>Required Min Filter Area ($ft^2$) | 08d<br>Required Max Pump Flow (gpm) |
|---|---|---|---|
| | | | |

| | | |
|---|---|---|
| 09 | Return Pipe Diameter (inches) | |
| 10 | Suction Pipe Diameter (inches) | |
| 11 | Filter Surface Area ($ft^2$) | |
| 12 | Max Pump Flow Rate (gpm) | |
| 13 | Measured Flow Rate Return Line (fps) | |
| 14 | Measured Flow Rate Suction Line (fps) | |
| 15 | Compliance Statement: | |

**The responsible person's signature on this compliance document affirms that all applicable requirements in this table have been met.**

| **E. Pool System Piping** (Section 150.0(p)2) | |
|---|---|
| 01 | The suction side pipe is straight for at least 4 pipe diameters before entering the pump (See table below for the required straight run lengths for various pipe sizes). |
| 02 | All elbows are sweep elbows, or an elbow type that has a pressure drop that is less than the pressure drop of a straight pipe with a length of 30 pipe diameters. |
| **The responsible person's signature on this compliance document affirms that all applicable requirements in this table have been met.** | |

| **F. Pool Filters and Valves** (Section 150.0(p)3 and 4) | |
|---|---|
| 01 | If a filter is used in a pool intended for public use: The size of the filter is at least the size specified in NSF/ANSI 50. |
| 02 | If a backwash valve is used: The diameter of the backwash valve is at least 2 inches, or the diameter of the return pipe, whichever is greater. |
| **The responsible person's signature on this compliance document affirms that all applicable requirements in this table have been met.** | |

| CERTIFICATE OF INSTALLATION | | CF2R-PLB-03-E |
|---|---|---|
| Pool And Spa Heating Systems - For Non-HERS Registered Projects | | (Page 3 of 3) |
| Project Name: | Enforcement Agency: | Permit Number: |
| Dwelling Address: | City: | Zip Code: |

| **DOCUMENTATION AUTHOR'S DECLARATION STATEMENT** | |
|---|---|
| 1. I certify that this Certificate of Installation documentation is accurate and complete. | |
| Documentation Author Name: | Documentation Author Signature: |
| Documentation Author Company Name: | Date Signed: |
| Address: | CEA/HERS Certification Identification (If applicable): |
| City/State/Zip: | Phone: |

**RESPONSIBLE PERSON'S DECLARATION STATEMENT**

I certify the following under penalty of perjury, under the laws of the State of California:

1. The information provided on this Certificate of Installation is true and correct.
2. I am either: a) a responsible person eligible under Division 3 of the Business and Professions Code in the applicable classification to accept responsibility for the system design, construction, or installation of features, materials, components, or manufactured devices for the scope of work identified on this Certificate of Installation, and attest to the declarations in this statement, or b) I am an authorized representative of the responsible person and attest to the declarations in this statement on the responsible person's behalf.
3. The constructed or installed features, materials, components or manufactured devices (the installation) identified on this Certificate of Installation conforms to all applicable codes and regulations and the installation conforms to the requirements given on the Certificate of Compliance, plans, and specifications approved by the enforcement agency.
4. I will ensure that a registered copy of this Certificate of Installation shall be posted or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a registered copy of this Certificate of Installation is required to be included with the documentation the builder provides to the building owner at occupancy.

| Responsible Builder/Installer Name: | Responsible Builder/Installer Signature: | |
|---|---|---|
| Company Name: (Installing Subcontractor or General Contractor or Builder/Owner) | Position With Company (Title): | |
| Address: | CSLB License: | |
| City/State/Zip: | Phone: | Date Signed: |

**CF2R-PLB-03-E User Instructions**

**A. Pool and Spa System Type**
Pick from Pool only, Spa only, or Pool and Spa

**B. Pool and Spa Systems and Equipment Requirements** (Section 110.4(a) and 110.5)
Before any pool or spa heating system or equipment may be installed, the manufacturer must certify to the Energy Commission that the system or equipment complies with §110.4 and §110.5. The requirements include minimum heating efficiency according to Appliance Efficiency Regulations, an on-off switch outside the heater, permanent and weatherproof operating instructions, no continuous pilot light, and no electric resistance heating.

**C. Pool and Spa System Installation Requirements** (Section 110.4(b))
A time switch or similar control mechanism must be installed as part of the pool water circulation control system that will allow all pumps to be set or programmed to run only during the off-peak electric demand period and for the minimum time necessary to maintain the water in the condition required by applicable public health standards.

**D. Pool Pump Sizing and Flow Rate Specification** (Section 150.0(p))
The pool filtration flow rate may not be greater than the rate needed to turn over the pool water volume in 6 hours or 36 gpm, whichever is greater. Calculate Max Flow Rate using the following equation:

$$\text{Max Flow Rate (gpm)} = \frac{\text{Pool Volume (gallons)}}{360\text{min.}}$$

Pool piping must be sized according to the maximum flow rate needed for all auxiliary loads. Show work to calculate return and suction line flow rate, minimum filter area, and the maximum pump flow rate correspond to the pool volume in accordance to section 150.0(p), or refer to Table C below for the prescriptive values. The maximum velocity allowed is 8 fps in the return line and 6 fps in the suction line, and the maximum pump flow rate is less than 6 hour filtration turnover.

03 Select whether the alternative calculation is used.
06 Enter the Pool Volume (gal).
07 Enter Filter Type (Cartridge, Sand, DE).
08a Enter the Required Minimum Return Pipe Diameter (inches).
08b Enter the Required Minimum Suction Pipe Diameter (inches).
08c Enter the Required Minimum Filter Area ($ft^2$).
08d Enter the Required Maximum Pump Flow (gpm).
09 Enter Return Pipe Diameter (inches).
10 Enter Suction Pipe Diameter (inches).
11 Enter Filter Surface Area ($ft^2$).
12 Enter the Maximum Pump Flow Rate (gpm).
13 Enter the Measured Flow Rate of the Return Line in fps. This is only used if the alternative calculation is used.
14 Enter the Measured Flow Rate of the Return Line in fps. This is only used if the alternative calculation is used.
15 Automatically completed Compliance Statement.

**E. Pool System Piping** (Section 150.0(p)2)
There must be a length of straight pipe that is greater than or equal to at least 4 inches pipe diameters installed before the pump. Refer to Table D below for the required pipe length. Traditional hard 90° elbows are not allowed. All elbows must be sweep elbows or a type of elbow that has a pressure drop less than the pressure drop of straight pipe with a length of 30 pipe diameters.

**F. Pool Filters and Valves** (Section 150.0(p)3 and 4)
Backwash valves must be sized to the diameter of the return pipe or 2 inches, whichever is greater. Multiport backwash valves have a high pressure drop and are discouraged.

**Table C**
**Pool sizing (Values are based on a maximum allowable turnover rate of 6- hours)**
Note: *For pumps greater than 1 hp. The maximum Pump Flow is the lowest speed default filtration*

| Max Pool Volume (gallons) | Min Pipe D or Greater (inches) | | Min Filter Area or more (square feet) | | | Max Pump Flow (gpm) |
|---|---|---|---|---|---|---|
| | Return | Suction | Cartridge | Sand | DE | |
| 13,000 | 1.5 | 1.5 | 100 | 2.4 | 20 | 36 |
| 17,000 | 1.5 | 2 | 130 | 3.1 | 25 | 47 |
| 21,000 | 2 | 2 | 160 | 3.9 | 30 | 58 |
| 28,000 | 2 | 2.5 | 210 | 5.2 | 40 | 78 |
| 42,000 | 2.5 | 3 | 320 | 7.8 | 60 | 117 |
| 48,000 | 3 | 3 | 360 | 8.9 | 70 | 133 |

**Table D**
**Pipe Diameter/Pipe Length**

| Pipe Diameter (inch) | Required Pipe Length leading into pump (inch) |
|---|---|
| 1.5 | 6 |
| 2 | 8 |
| 2.5 | 10 |
| 3 | 12 |

# Smoke & Carbon Monoxide Alarms

# Code Requirement

## -Residential Smoke & Carbon Monoxide Alarms for existing dwellings-

State Building Code Requirement effective **January 1, 2011**

2016 California Residential Code section **R314 & R315**

Where a permit is required for alterations, repairs or additions exceeding $1000 in valuation, **including exterior work, i.e. roofing, HVAC change-outs, windows, etc.** existing dwelling or sleeping units that have attached garages or fuel burning appliances including fireplaces shall be provide with a carbon monoxide alarm.

Carbon monoxide alarms shall be installed in the following locations:

1. Outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom(s).
2. On every level of a dwelling unit including basements.
3. Bedrooms with gas appliances (fireplaces).

Smoke alarms shall be installed in the following locations:

1. In every bedroom
2. Outside each separate dwelling unit sleeping area; (hallways)
3. On every level of the dwelling unit including basements.

**Power supply.** The smoke & carbon monoxide alarms shall receive their primary power from the building wiring and shall be equipped with a battery back-up.

Exception: In existing dwelling units the alarms are permitted to be solely battery operated where repairs or alteration do not result in the removal or wall and ceiling finishes or there is no access by means of attic basement or crawl space.

**Interconnection.** Where more than one smoke & carbon monoxide alarm is required to be installed within the dwelling unit or within a sleeping unit the alarm shall be interconnected in a manner that activation of one alarm shall activate all of the alarms.

Exception: Interconnection is not required in existing dwelling units where repairs do not result in the removal of wall and ceiling finishes, there is no access by means of attic, basement or crawl space.

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**The Building Inspector will verify the installation of the smoke & carbon monoxide alarm(s) during the inspection process.**

**OR**

**Complete and sign under the penalty of perjury the verification form on the reverse side of this notice.**

# CITY OF ESCALON

DEVELOPMENT SERVICES

2060 McHenry Avenue ▪ Escalon, California 95320 ▪ Office 209.691.7430 Fax 209.691.7439

## SMOKE & CARBON MONOXIDE ALARM RETROFIT VERIFICATION

I,_____ , and I,_____ ,
**(Print Property Owner's Name)** **(Tenant's Name - if same as Owner write "Same")**

who own and/or live in the dwelling located at:_____
**(Address)**

verify that the smoke & carbon monoxide alarms required by the California Residential Code (CRC) have been installed in the dwelling, in compliance with the code and with the manufacturer's instructions and further that they have been tested and do function properly.

In an effort to enhance life safety within dwellings, CRC Section R314 and R315 require the retrofit of these alarms in existing dwellings when alterations, repairs or additions requiring a permit and exceeding $1,000 in value are made. Generally, the alarms must be hard wired (110 volt) with battery back-up and all alarms are to be interconnected. If the installation of the alarms will require the removal of wall or ceiling finishes or there is no access by means of attic, basement or crawl space, then alarms may be solely battery operated and not interconnected. Alarms must be installed in **all** of the following locations within the existing dwelling:

- In all bedrooms (Smoke alarms) CO alarms in bedrooms with a gas appliance
- Immediately outside of each separate bedroom area.
- In each story level of the dwelling, including basements and habitable attic rooms.

***I have read and understand the above requirements and affirm by my signature, that all required alarms mentioned above have been properly installed and tested. (Both signature lines below must be completed).***

_____ _____

*Signature of Owner* Date *Signature of Tenant* Date
***(If same as Owner - write "Same")***

**ATTENTION OWNER - OCCUPANT:**

***This is a Voluntary Smoke & Carbon Monoxide Alarm verification procedure. If you prefer a Building Inspector to perform the verification, you must arrange to have an adult present at the time of inspection.***

# City of Escalon
# Examples of Construction Best Management Practices

Construction projects are required to implement stormwater best management practices, as they apply to your project, all year long.

## MATERIALS & WASTE MANAGEMENT

### Non-Hazardous Materials

- ☐ Berm and cover stockpiles of sand, dirt or other construction material with tarps when rain is forecast or if not actively being used within 14 days.
- ☐ Use (but don't overuse) reclaimed water for dust control.

### Hazardous Materials

- ☐ Label all hazardous materials and hazardous wastes (such as pesticides, paints, thinners, solvents, fuel, oil, and antifreeze) in accordance with city, county, state and federal regulations.
- ☐ Store hazardous materials and wastes in water tight containers, store in appropriate secondary containment, and cover them at the end of every work day or during wet weather or when rain is forecast.
- ☐ Follow manufacturer's application instructions for hazardous materials and be careful not to use more than necessary. Do not apply chemicals outdoors when rain is forecast within 24 hours.
- ☐ Arrange for appropriate disposal of all hazardous wastes.

### Waste Management

- ☐ Cover waste disposal containers securely with tarps at the end of every work day and during wet weather.
- ☐ Check waste disposal containers frequently for leaks and to make sure they are not overfilled. Never hose down a dumpster on the construction site.
- ☐ Clean or replace portable toilets, and inspect them frequently for leaks and spills.
- ☐ Dispose of all wastes and debris properly. Recycle materials and wastes that can be recycled (such as asphalt, concrete, aggregate base materials, wood, gyp board, pipe, etc.)
- ☐ Dispose of liquid residues from paints, thinners, solvents, glues, and cleaning fluids as hazardous waste.

### Construction Entrances and Perimeter

- ☐ Establish and maintain effective perimeter controls and stabilize all construction entrances and exits to sufficiently control erosion and sediment discharges from site and tracking off site.
- ☐ Sweep or vacuum any street tracking immediately and secure sediment source to prevent further tracking. Never hose down streets to clean up tracking.

## EQUIPMENT MANAGEMENT & SPILL CONTROL

### Maintenance and Parking

- ☐ Designate an area, fitted with appropriate BMPs, for vehicle and equipment parking and storage.
- ☐ Perform major maintenance, repair jobs, and vehicle and equipment washing off site.
- ☐ If refueling or vehicle maintenance must be done onsite, work in a bermed area away from storm drains and over a drip pan or drop cloths big enough to collect fluids. Recycle or dispose of fluids as hazardous waste.
- ☐ If vehicle or equipment cleaning must be done onsite, clean with water only in a bermed area that will not allow rinse water to run into gutters, streets, storm drains, or surface waters.
- ☐ Do not clean vehicle or equipment onsite using soaps, solvents, degreasers, or steam cleaning equipment.

### Spill Prevention and Control

- ☐ Keep spill cleanup materials (e.g., rags, absorbents and cat litter) available at the construction site at all times.
- ☐ Inspect vehicles and equipment frequently for and repair leaks promptly. Use drip pans to catch leaks until repairs are made.
- ☐ Clean up spills or leaks immediately and dispose of cleanup materials properly.
- ☐ Do not hose down surfaces where fluids have spilled. Use dry cleanup methods (absorbent materials, cat litter, and/or rags).
- ☐ Sweep up spilled dry materials immediately. Do not try to wash them away with water, or bury them.
- ☐ Clean up spills on dirt areas by digging up and properly disposing of contaminated soil.
- ☐ Report significant spills immediately. You are required by law to report all significant releases of hazardous materials, including oil. To report a spill: 1) Dial 911 or your local emergency response number, 2) Call the Governor's Office of Emergency Services Warning Center, (800) 852-7550 (24 hours).

## EARTHMOVING

- ☐ Schedule grading and excavation work during dry weather.
- ☐ Stabilize all denuded areas, install and maintain temporary erosion controls (such as erosion control fabric or bonded fiber matrix) until vegetation is established.
- ☐ Remove existing vegetation only when absolutely necessary, and seed or plant vegetation for erosion control on slopes or where construction is not immediately planned.
- ☐ Prevent sediment from migrating offsite and protect storm drain inlets, gutters, ditches, and drainage courses by installing and maintaining appropriate BMPs, such as fiber rolls, silt fences, sediment basins, gravel bags, berms, etc.
- ☐ Keep excavated soil on site and transfer it to dump trucks on site, not in the streets.

### Contaminated Soils

- ☐ If any of the following conditions are observed, test for contamination and contract the Regional Water Quality Control Board:
  - Unusual soil conditions, discoloration, or odor.
  - Abandoned underground tanks.
  - Abandoned wells.
  - Buried barrels, debris, or trash.

## PAVING/ASPHALT WORK

- ☐ Avoid paving and seal coating in wet weather or when rain is forecast, to prevent materials that have not cured from contacting stormwater runoff.
- ☐ Cover storm drain inlets and manholes when applying seal coat, tack coat, slurry seal, fog seal, etc.
- ☐ Collect and recycle or appropriately dispose of excess abrasive gravel or sand. Do NOT sweep or wash it into gutters.
- ☐ Do not use water to wash down fresh asphalt concrete pavement.

### Sawcutting & Asphalt/Concrete Removal

- ☐ Protect nearby storm drain inlets when saw cutting. Use filter fabric, catch basin inlet filters, or gravel bags to keep slurry out of the storm drain system.
- ☐ Shovel, absorb, or vacuum saw-cut slurry and dispose of all waste as soon as you are finished in one location or at the end of each work day (whichever is sooner!).
- ☐ If sawcut slurry enters a catch basin, clean it up immediately.

## LANDSCAPING

- ☐ Protect stockpiled landscaping materials from wind and rain by storing them under tarps all year-round.
- ☐ Stack bagged material on pallets and under cover.
- ☐ Discontinue application of any erodible landscape material within 2 days before a forecast rain event or during wet weather.

## CONCRETE, GROUT & MORTAR APPLICATION

- ☐ Store concrete, grout, and mortar away from storm drains or waterways, and on pallets under cover to protect them from rain, runoff, and wind.
- ☐ Wash out concrete equipment/trucks offsite or in a designated washout area, where the water will flow into a temporary waste pit, and in a manner that will prevent leaching into the underlying soil or onto surrounding areas. Let concrete harden and dispose of as garbage.
- ☐ When washing exposed aggregate, prevent washwater from entering storm drains. Block any inlets and vacuum gutters, hose washwater onto dirt areas, or drain onto a bermed surface to be pumped and disposed of properly.

## PAINTING & PAINT REMOVAL

### Painting Cleanup and Removal

- ☐ Never clean brushes or rinse paint containers into a street, gutter, storm drain, or stream.
- ☐ For water-based paints, paint out brushes to the extent possible, and rinse into a drain that goes to the sanitary sewer. Never pour paint down a storm drain.
- ☐ For oil-based paints, paint out brushes to the extent possible and clean with thinner or solvent in a proper container. Filter and reuse thinners and solvents. Dispose of excess liquids as hazardous waste.
- ☐ Paint chips and dust from non-hazardous dry stripping and sand blasting may be swept up or collected in plastic drop cloths and disposed of as trash.
- ☐ Chemical paint stripping residue and chips and dust from marine paints or paints containing lead, mercury, or tributyltin must be disposed of as hazardous waste. Lead based paint removal requires a state certified contractor.

## DEWATERING

- ☐ Discharges of groundwater or captured runoff from dewatering operations must be properly managed and disposed. When possible send dewatering discharge to landscaped area or sanitary sewer. If discharging to the sanitary sewer call your local wastewater treatment plant.
- ☐ Divert run-on water from offsite away from all disturbed areas.
- ☐ When dewatering, notify and obtain approval from the local municipality before discharging water to a street gutter or storm drain. Filtration or diversion through a basin tank, or sediment trap may be required.
- ☐ In areas of known or suspected contamination, call your local agency to determine whether the ground water must be tested. Pumped groundwater may need to be collected and hauled off-site for treatment and proper disposal.

**For additional information on best management practices:**
**http://www.dot.ca.gov/hq/construc/stormwater/CSBMPM_303_Final.pdf**

# NOTICE TO APPLICANTS FOR BUSINESS LICENSES AND COMMERCIAL BUILDING PERMITS:

Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

DEPARTMENT OF GENERALSERVICES, Division of the State Architect, CASp Program

*www.dgs.ca.gov/dsa*

*www.dgs.ca.gov/casp*

DEPARTMENT OF REHABILITATION Disability Access Services

*www.dor.ca.gov*

*www.rehab.cahwnet.gov/disabilityaccessinfo*

DEPARTMENT OF GENERALSERVICES, California Commission on Disability Access

*www.ccda.ca.gov*

*www.ccda.ca.gov/resources-menu/*

## CERTIFIED ACCESS SPECIALIST INSPECTION SERVICES

Compliance with state and federal construction-related accessibility standards ensures that public places are accessible and available to individuals with disabilities. Whether your business is moving into a newly constructed facility or you are planning an alteration to your current facility, by engaging the services of a Certified Access Specialist (CASp) early in this process you will benefit from the advantages of compliance and under the Construction-Related Accessibility Standards Compliance Act (CRASCA, Civil Code 55.51-55.545), also benefit from legal protections.

Although your new facility may have already been permitted and approved by the building department, it is important to obtain CASp inspection services after your move-in because unintended access barriers and violations can be created, for example, placing your furniture and equipment in areas required to be maintained clear of obstructions. For planned alterations, a CASp can provide plan review of your improvement plans and an access compliance evaluation of the public accommodation areas of your facility that may not be part of the alteration.

A CASp is a professional who has been certified by the State of California to have specialized knowledge regarding the applicability of accessibility standards. CASp inspection reports prepared according to CRASCA entitle business and facility owners to specific legal benefits, in the event that a construction-related accessibility claim is filed against them.

To find a CASp, visit *www.apps2.dgs.ca.gov/DSA/casp/casp_certified_list.aspx*.

## GOVERNMENT TAX CREDITS, TAX DEDUCTIONS AND FINANCING

State and federal programs to assist businesses with access compliance and access expenditures are available:

### Disabled Access Credit for Eligible Small Businesses

FEDERAL TAX CREDIT—Internal Revenue Code Section 44 provides a federal tax credit for small businesses that incur expenditures for the purpose of providing access to persons with disabilities. For more information, refer to Internal Revenue Service (IRS) Form 8826: Disabled Access Credit at *www.irs.gov*.

STATE TAX CREDIT—Revenue and Taxation Code Sections 17053.42 and 23642 provide a state tax credit similar to the federal Disabled Access Credit, with exceptions. For more information, refer to Franchise Tax Board (FTB) Form 3548: Disabled Access Credit for Eligible Small Businesses at *www.ftb.ca.gov*.

### Architectural and Transportation Barrier Removal Deduction

FEDERAL TAX DEDUCTION—Internal Revenue Code Section 190 allows businesses of all sizes to claim an annual deduction for qualified expenses incurred to remove physical, structural and transportation barriers for persons with disabilities. For more information, refer to IRS Publication 535: Business Expenses at *www.irs.gov*.

### California Capital Access Financing Program

STATE FINANCE OPTION—The California Capital Access Program (CalCAP) Americans with Disabilities Act (CalCAP/ADA) financing program assists small businesses with financing the costs to alter or retrofit existing small business facilities to comply with the requirements of the federal ADA. Learn more at *www.treasurer.ca.gov/cpcfa/calcap/*.

## FEDERAL AND STATE LEGAL REQUIREMENTS ON ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

AMERICANS WITH DISABILITIES ACT OF 1990 (ADA) —The ADA is a federal civil rights law that prohibits discrimination against individuals with disabilities, and requires all public accommodations and commercial facilities to be accessible to individuals with disabilities. Learn more at *www.ada.gov*.

CALIFORNIA BUILDING CODE (CBC)—The CBC contains the construction-related accessibility provisions that are the standards for compliant construction. A facility's compliance is based on the version of the CBC in place at the time of construction or alteration. Learn more at *www.bsc.ca.gov*.

# CITY OF ESCALON

DEVELOPMENT SERVICES

2060 McHenry Avenue ▪ Escalon, California 95320 ▪ Office 209.691.7430 Fax 209.691.7439 ▪ Email dtrejo@cityofescalon.org

## Building Permit Submittal Chart

This chart represents the minimum number of submittals that are normally required at the time of submitting the permit application. Boxes marked "R" are items that may be requested by Development Services.

| | New Single Family Dwelling | New Multi-Family Dwelling | New Commercial | Commercial Tenant Improvement | Pool | Residential/ Commercial Addition | Residential/ Commercial Remodel/ Repair | Miscellaneous Structure | Master Plan Check |
|---|---|---|---|---|---|---|---|---|---|
| Building Permit Application | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Complete Plans | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| Site Plan | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| Structural Detail & Calculations | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| Energy Calculations | 3 | 3 | 3 | 3 | R | 3 | 3 | R | 3 |
| Truss Calculations | 3 | 3 | 3 | R | R | 3 | 3 | R | 3 |
| Electric Load Calculations | 3 | 3 | 3 | 3 | R | 3 | R | R | 3 |
| Grading / Drainage Plans | 3 | 3 | 3 | R | 3 | 3 | R | 3 | 3 |
| Civil / Site Improvement Plans | 3 | 3 | 3 | R | R | 3 | R | R | R |
| Soil Report | 3 | 3 | 3 | R | R | 3 | R | R | 3 |
| Waste Reduction Program Form* | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| School Fee Certificate of Compliance | 1 | 1 | 1 | 1 | R | R | R | R | R |
| Owner-Builder Verification Form | 1 | 1 | R | R | 1 | 1 | 1 | 1 | R |
| Fire Systems & Alarms | 3 | 3 | 3 | R | R | 3 | 3 | R | 3 |

- ☑ Plans and calculations shall have the designer's "WET" stamp
- ☑ Plan check deposits are required at the time of submittal on new single and multi-family residences, new commercial buildings, and tenant improvements. Please call 209-691-7430 for deposit amount.
- ☑ If the project involves a food establishment or food handling (i.e.: food preparation, prepackaged foods or food service), also contact the San Joaquin Environmental Health Department at 209-468-3420 to determine if a Health Department permit is required.

* Waste Reduction Form is only required if project value exceeds $250,000 or if project exceeds 5,000 sq.ft.