

City of Pittsburg

Development Services Department / Building Division

Civic Center, 65 Civic Avenue, Pittsburg CA 94565 Phone: (925) 252-4910 Fax: (925) 252-4814

CONTRACTORS DECLARATION

of Chapter 9 (Commencing with Professionals Code and my licer	Section 7000) of Divis	ion 3 of the Business &
License#	Lic. Class	
Business Name		
*WORKER'S COMPENSATION	DECLARATION	
I hereby affirm under penalty of p	perjury one of the follo	wing declarations:
I hereby affirm that I have a certi Worker's Compensation Insurar		
Carrier	Policy #	Exp.
*CERTIFICATE OF EXEMPTION (This section need not be completess.)		
I certify that in the performance of employ any person in a manner Compensation Laws of California	so as to become subje	•
DateApplicar	nt Signature	
NOTICE TO APPLICANT: If after become subject to the Worker's must forthwith comply with such	Compensation provision	ons of the Labor Code, you
I certify that I have read this apcorrect. I agree to comply with building construction, and her above-mentioned property for	n all city ordinances a reby authorize repres	and state laws relating to entatives to enter upon the
Signature of Applicant/Agent _		Date