CITY OF LA QUINTA

JOB ADDRESS _____ **PERMIT NUMBER** _____ **OWNER** _____ **BUILDER** _____

This form shall be posted on the job with the Building Inspection Card at all times in a conspicuous place. Only persons appearing on the list or their employees are authorized to work on this job. Any changes to this list must be approved by the Building Division prior to commencement of work. Failure to comply will result in a stoopage of work and/or the voidance of building permmit. For each applicable trade, all information requested below must be completed by the applicant. "On File" is not an accepatble resonse.

TRADE/CLASSIFICATION	CONTRACTOR	STATE CONTRACTOR'S LICENSE			WORKER COMPENSATION INSURANCE			CITY BUSINESS LICENSE	
	Company Name	Classification (e.g. A, B, C-8)	California License Number	Exp. Date	Carrier Name (e.g. State Fund, CalComp)	Policy Numbers (Format Varies)	Exp. Date	License Number	Exp. Date
EARTHWORK (C-12)									
CONCRETE (C-8)									
FRAMING (C-5)									
STRUCT. STEEL (C-51)									
MASONRY (C-29)									
PLUMBING (C-36)									
LATH, PLASTER (C-35)									
DRYWALL(C-9)									
HVAC (C-20)									
ELECTRICAL (C-10)									
ROOFING (C-39)									
SHEET METAL (C-43)									
FLOORING(C-16)									
GLAZING(C-17)									
INSULATION (C-2)									
SEWAGE DISP. (C-42)									
PAINTING (C-33)									
CERAMIC TILE (C-54)									
CABINETS (C-6)									
FENCING (C-13)									
LANDSCAPING (C-27)									
POOL (C-53)									