



# DEPARTMENT OF RESOURCE MANAGEMENT

## Building Division

1855 Placer Street, Suite 102

Redding, California 96001

Phone: (530) 225-5761 Fax: (530) 245-6468

Inspection Request Line: (530) 244-5068

Web: [shastacounty.gov/resource-management](http://shastacounty.gov/resource-management) Email: [resourcemanagement@co.shasta.ca.us](mailto:resourcemanagement@co.shasta.ca.us)

### CONTRACTOR/OWNER TIEDOWN SELF CERTIFICATION

(Rev: 01-03-23)

Date: \_\_\_\_\_

PERMIT# \_\_\_\_\_

Project Address: \_\_\_\_\_

The following is to be completed by A **California licensed contractor or property owner** participating in the Shasta County Self-Certification Program **when installing an Accessory Structure tie down.**

Contractor's Name: \_\_\_\_\_ License No. \_\_\_\_\_

Contractor's Mailing Address: \_\_\_\_\_ Phone # (required): \_\_\_\_\_

Contractor's Email: \_\_\_\_\_ FAX #: \_\_\_\_\_

**INSTALLER**

I certify that the installation is in compliance with applicable code requirements and manufactures specifications. I hereby affirm under penalty of perjury and under the laws of the State of California that I am licensed to perform work under provisions of the Business and Professions Code, and my license is in full force and effect.

\_\_\_\_\_  
*Installer's Signature*

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

- OR -

**PROPERTY OWNER**

As the property owner of the project address noted above, I have read, understand and agree to participate in the System Self-Certification Program. I further understand that by participating in this program, the tie down system will not be inspected by a Shasta County Building Inspector during construction or after installation. The Building Division may request and reserves the right to verify code compliance after the installation is complete.

\_\_\_\_\_  
*Property Owner's Signature*

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

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Email*

This form must be completed and returned to the Department of Resource Management, Building Division, for a final approval. Please return this form to the Building Division by mail or fax.

Please mail to: Shasta County Department  
Department of Resource Management  
Building Division  
1855 Placer Street, Suite 102  
Redding, CA 96001