

APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

PROPERTY TAX CODE/ID NUMBER: _____

| | |
|---|---|
| Authority: P.A. 230 of 1972, as amended Completion: Mandatory to obtain permit Penalty: permit will not be issued | The Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap, or political beliefs. |
|---|---|

APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V AND VI

NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING, MECHANICAL, AND ELECTRICAL WORK PERMITS.

| | | | | |
|-------------------------------|---------|----------|--------|---------|
| I. PROJECT INFORMATION | | | | |
| Project Description | | | | |
| CITY | VILLAGE | TOWNSHIP | COUNTY | ZIPCODE |
| BETWEEN _____ AND _____ | | | | |

| | | | |
|---|-------|---------|------------------|
| II. IDENTIFICATION | | | |
| A. OWNER OR LESSEE NAME | | ADDRESS | |
| CITY | STATE | ZIPCODE | TELEPHONE NUMBER |
| B. ARCHITECT OR ENGINEER NAME | | ADDRESS | |
| CITY | STATE | ZIPCODE | TELEPHONE NUMBER |
| LICENSE NUMBER | | | EXPIRATION DATE |
| C. CONTRACTOR NAME | | ADDRESS | |
| CITY | STATE | ZIPCODE | TELEPHONE NUMBER |

All information submitted on this application is accurate to the best of my knowledge.

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125, 1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subjected to civil fines.

SIGNATURE OF APPLICANT

Date:

Plan review fee enclosed _____

Building permit fee enclosed _____

VII. LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS

| | REQUIRED? | APPROVED | DATE | NUMBER | BY |
|----------------------|--|----------|------|--------|----|
| A. ZONING | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| B. FIRE DISTRICT | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| C. POLLUTION CONTROL | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| D. NOISE CONTROL | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| E. SOIL ERROSION | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| F. FLOOD ZONE | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| G. WATER SUPPLY | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| H. SEPTIC SYSTEM | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| I. VARIANCE GRANTED | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |
| J. OTHER | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

VIII. VALIDATION – FOR DEPARTMENT USE ONLY

Use Group _____

Base Fee _____

Type of Construction _____

Number of Inspections _____

Square Feet _____

Approval Signature

| | |
|-------|------|
| Title | Date |
|-------|------|