

GRANT TOWNSHIP

7942 WILDCAT ROAD ~ JEDDO, MI 48032 ~ (810) 327-6775

BUILDING PERMIT APPLICATION

AUTHORITY: P.A. 230 OF 1972, AS AMENDED

COMPLETION: MANDATORY TO OBTAIN PERMIT

PENALTY: PERMIT NOT ISSUED

Applicant to complete ALL items in Sections I, II, III, IV, V, VI, VII and VIII.

Faxed or incomplete applications will not be accepted.

NOTE: Separate applications MUST be completed for Electrical, Mechanical and Plumbing work permits.

I. PROJECT INFORMATION

Street Address:	Parcel Number: 74-21-
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II. IDENTIFICATION

A. OWNER <input type="checkbox"/> OR LESSEE <input type="checkbox"/> (Please check one)				
Name:		Address:		
City:	State:	Zip Code:	Phone Number(s):	Fax Number:

B. ARCHITECT <input type="checkbox"/> OR ENGINEER <input type="checkbox"/> (Please check one)				
Firm / Company Name:		Address:		
City:	State:	Zip Code:	Phone Number(s):	Fax Number:
Contact Name:	License Number:		License Expiration Date:	

C. CONTRACTOR				
Name:		Address:		
City:	State:	Zip Code:	Phone Number(s):	Fax Number:
Builders License Number:	License Expiration Date:		Federal ID Number or reason for exemption:	
Workers Comp Insurance Carrier or reason for exemption:			MESC Employer Number or reason for exemption:	

III. APPLICANT INFORMATION

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information:				
Name:		Address:		
City:	State:	Zip Code:	Phone Number(s):	Fax Number:
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE. BY SIGNING, PERMISSION TO ENTER PROPERTY IS GRANTED TO ANY TOWNSHIP REPRESENTATIVE FOR THE PURPOSES OF GATHERING/VERIFYING INFORMATION RELATED TO THIS APPLICATION.				
Section 23a of the State Construction Code Act 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. Violations of Section 23a are subject to civil fines.				
SIGNATURE OF APPLICANT:			DATE:	

IV. TYPE OF IMPROVEMENT AND PLAN REVIEW**A. TYPE OF IMPROVEMENT**

1. ☐ New Building 2. ☐ Alteration 3. ☐ Demolition 4. ☐ Foundation Only 5. ☐ Relocation
6. ☐ Addition 7. ☐ Repair 8. ☐ Mobile Home Set Up 9. ☐ Pre-manufacture 10. ☐ Special Inspection

B. PLAN REVIEW REQUIRED

Plans must be submitted with the appropriate drawings (cross-wall section, elevation, floor plan drawings, energy code calculations) before a permit can be issued unless otherwise noted.

Plans and specifications are required for all building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.

V. PROPOSED USE OF BUILDING**A. RESIDENTIAL**

1. ☐ Single Family 2. ☐ Two Family 3. ☐ Multiple Family (3 units or more) 4. ☐ Hotel/Motel (No. of Units _____)
5. ☐ Attached Garage 6. ☐ Detached Garage 7. ☐ *Any Change in Use 8. ☐ Other:

B. NON-RESIDENTIAL

1. ☐ School, Library, Educational 2. ☐ Store, Mercantile 3. ☐ Tanks, Towers 4. ☐ Parking Garage
5. ☐ Service Station 6. ☐ Hospital, Institution 7. ☐ Office, Bank, Professional 8. ☐ Public Utility 9. ☐ Amusement
10. ☐ Church, Religion 11. ☐ Industrial 12. ☐ *Any Change in Use 13. ☐ Other:

C. USE DESCRIPTION / SCOPE OF WORK

1. Primary Use description / Scope of work:

2. *Change in Use description (Complete if "Any Change in Use" was checked above):

D. ADDITIONAL PERMITS REQUIRED (PRIOR TO BUILDING PERMIT APPROVAL)

1. ☐ MDEQ: a. ☐ High Risk Soil Erosion b. ☐ Air Quality Abatement
2. ☐ MDOT
3. ☐ SCC Road Commission: a. ☐ Driveway Permit b. ☐ Soil Erosion
4. ☐ SCC Health Department: a. ☐ Well Permit b. ☐ Septic Permit c. ☐ Food Establishment
5. ☐ SCC Drain Commission: a. ☐ Retention/Detention, Storm Water Discharge
6. ☐ Other:

VI. SELECTED CHARACTERISTICS OF BUILDING**A. PRINCIPAL TYPE OF FRAME**

1. ☐ Masonry, Wall Bearing 2. ☐ Wood 3. ☐ Structural Steel 4. ☐ Reinforced Concrete 5. ☐ Other:

B. PRINCIPAL TYPE OF HEATING FUEL

1. ☐ Gas 2. ☐ Oil 3. ☐ Electric 4. ☐ Coal 5. ☐ Other:

C. TYPE OF SEWAGE DISPOSAL

1. ☐ Public or Private Company 2. ☐ Septic System

D. TYPE OF WATER SUPPLY

1. ☐ Public or Private Company 2. ☐ Well

E. TYPE OF MECHANICAL

1. Will there be: ☐ Air Conditioning? ☐ Fire Suppression? ☐ Fireplace? Flue Sizes: ____x____x____ Type: ☐ Clay
☐ Metal

F. DIMENSIONS / DATA

1. Number of Stories: _____ 2. Use Group: _____ 3. Const. Type: _____ 4. Number of Occupants: _____
5. TOTAL BUILDING HEIGHT: _____ 6. HEIGHT PER ORDINANCE CALCULATION (*office use*): _____
Floor Area: 1. Basement: _____ 2. 1st Floor: _____ 3. 2nd Floor: _____ 4. 3rd – 5th Floor: _____
5. Size of Addition or Structure: _____ 6. Living Area (sq. ft): _____ 7. Garage Area (sq. ft): _____
8. Office/Sales Area (sq. ft): _____ 9. Service Area (sq. ft): _____ 10. TOTAL AREA: _____

Basement Detail: ☐ Full Basement ☐ Partial Basement ☐ Split Level ☐ Finished ☐ No Basement

1. Enclosed Spaces: _____ 2. Outdoor Spaces: _____ 3. Handicap Spaces: _____

Value of Proposed Construction: \$

PLOT PLAN MUST INCLUDE: 1) LOT DIMENSIONS, 2) STREET, ALLEY AND EASEMENT LOCATIONS, 3) LOCATION, USE AND DIMENSIONS OF EXISTING STRUCTURES ON LOT, 4) PARKING SPACES, 5) PROPOSED CONSTRUCTION WITH DIMENSIONS, 6) FRONT, REAR & SIDEYARD SETBACKS, 7) NORTH ARROW, 8) DRAINS / NATURAL DRAINS

A full-page view of a blank sheet of graph paper. The grid consists of small squares formed by thin black lines. There are no margins, text, or other markings on the page.

Grant Township will not discriminate against any individual or group because of race, sex, religion, age, natural origin, color, mental status, disability or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

~FOR OFFICE USE ONLY~

IX. APPLICATION REVIEWS AND APPROVAL

A. ZONING REVIEW (IF REQUIRED)

Use Zone:	Lot Area:	Lot Frontage:	Lot Depth:
ZBA Hearing Date:	Planning Commission Hearing Date:	Hearing Comments:	
Remarks:			

B. BUILDING DEPARTMENT REVIEW / APPROVAL

Special Information / Details:

<input type="checkbox"/> Rejected	Date:	Reviewed by:	<input type="checkbox"/> Building Official
<input type="checkbox"/> Approved			<input type="checkbox"/> Other:

FEE DESCRIPTIONS	FEE TOTALS
Building Permit Fee	\$
Plan Review Fee	\$
Addressing Fee	\$
	\$
TOTAL DUE UPON ISSUANCE	\$

PERMIT NUMBER:	
ISSUE DATE:	

PAYMENT VALIDATION

RECEIPT # _____ ISSUE DATE: _____ CASH ☐ CHECK ☐ CHECK NUMBER:

~INSPECTIONS~

Footings/Foundation: _____

Date inspected: _____ Re-inspection date (if necessary): _____ Inspector initials: _____

Backfill: _____

Date inspected: _____ Re-inspection date (if necessary): _____ Inspector initials: _____

Rough framing/flashings: _____

Date inspected: _____ Re-inspection date (if necessary): _____ Inspector initials: _____

Insulation: _____

Date inspected: _____ Re-inspection date (if necessary): _____ Inspector initials: _____

Final: _____

Date inspected: _____ Re-inspection date (if necessary): _____ Inspector initials: _____