

## APPLICATION for PLAN EXAMINATION, ZONING and BUILDING PERMIT

**IMPORTANT - Applicants Complete All Items in Sections: I, II, III, IV, V and VII**

<b>I. LOCATION of BUILDING</b>	Location (Street Number and Street Name)	Zoning District
	Names of Cross Streets Between _____ and _____	
	Subdivision	Lot Number
		Lot Size

**II. TYPE and COST of BUILDING - All Applicants Complete Parts A through D**

<p><b>A. TYPE of IMPROVEMENT</b></p> <p>1 <input type="checkbox"/> New Building</p> <p>2 <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 13)</p> <p>3 <input type="checkbox"/> Alteration (See number 2 above)</p> <p>4 <input type="checkbox"/> Repair, Replacement</p> <p>5 <input type="checkbox"/> Wrecking (if multifamily residential, enter number of unit in building in Part D, 13)</p> <p>6 <input type="checkbox"/> Moving (Relocation)</p> <p>7 <input type="checkbox"/> Foundation only</p> <p>8 <input type="checkbox"/> Re-Roofing</p>	<p><b>D. PROPOSED USE</b> For "Wrecking" most recent use</p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p><b>Residential</b></p> <p>12 <input type="checkbox"/> One Family</p> <p>13 <input type="checkbox"/> Two or more Family <small>Enter number of units _____</small></p> <p>14 <input type="checkbox"/> Transient Hotel, Motel or Dormitory <small>Enter number of units _____</small></p> <p>15 <input type="checkbox"/> Garage</p> <p>16 <input type="checkbox"/> Carport</p> <p>17 <input type="checkbox"/> Other (Specify) _____</p> </td> <td style="width:50%; vertical-align: top;"> <p><b>Nonresidential</b></p> <p>18 <input type="checkbox"/> Amusement, Recreational</p> <p>19 <input type="checkbox"/> Church, other Religious</p> <p>20 <input type="checkbox"/> Industrial</p> <p>21 <input type="checkbox"/> Parking Garage</p> <p>22 <input type="checkbox"/> Service Station, Repair Garage</p> <p>23 <input type="checkbox"/> Hospital, Institutional</p> <p>24 <input type="checkbox"/> Office, Bank, Professional</p> <p>25 <input type="checkbox"/> Public Utility</p> <p>26 <input type="checkbox"/> School, Library, other Educational</p> <p>27 <input type="checkbox"/> Stores, Mercantile</p> <p>28 <input type="checkbox"/> Tanks, Towers</p> <p>29 <input type="checkbox"/> Other (Specify) _____</p> </td> </tr> </table>	<p><b>Residential</b></p> <p>12 <input type="checkbox"/> One Family</p> <p>13 <input type="checkbox"/> Two or more Family <small>Enter number of units _____</small></p> <p>14 <input type="checkbox"/> Transient Hotel, Motel or Dormitory <small>Enter number of units _____</small></p> <p>15 <input type="checkbox"/> Garage</p> <p>16 <input type="checkbox"/> Carport</p> <p>17 <input type="checkbox"/> Other (Specify) _____</p>	<p><b>Nonresidential</b></p> <p>18 <input type="checkbox"/> Amusement, Recreational</p> <p>19 <input type="checkbox"/> Church, other Religious</p> <p>20 <input type="checkbox"/> Industrial</p> <p>21 <input type="checkbox"/> Parking Garage</p> <p>22 <input type="checkbox"/> Service Station, Repair Garage</p> <p>23 <input type="checkbox"/> Hospital, Institutional</p> <p>24 <input type="checkbox"/> Office, Bank, Professional</p> <p>25 <input type="checkbox"/> Public Utility</p> <p>26 <input type="checkbox"/> School, Library, other Educational</p> <p>27 <input type="checkbox"/> Stores, Mercantile</p> <p>28 <input type="checkbox"/> Tanks, Towers</p> <p>29 <input type="checkbox"/> Other (Specify) _____</p>
<p><b>Residential</b></p> <p>12 <input type="checkbox"/> One Family</p> <p>13 <input type="checkbox"/> Two or more Family <small>Enter number of units _____</small></p> <p>14 <input type="checkbox"/> Transient Hotel, Motel or Dormitory <small>Enter number of units _____</small></p> <p>15 <input type="checkbox"/> Garage</p> <p>16 <input type="checkbox"/> Carport</p> <p>17 <input type="checkbox"/> Other (Specify) _____</p>	<p><b>Nonresidential</b></p> <p>18 <input type="checkbox"/> Amusement, Recreational</p> <p>19 <input type="checkbox"/> Church, other Religious</p> <p>20 <input type="checkbox"/> Industrial</p> <p>21 <input type="checkbox"/> Parking Garage</p> <p>22 <input type="checkbox"/> Service Station, Repair Garage</p> <p>23 <input type="checkbox"/> Hospital, Institutional</p> <p>24 <input type="checkbox"/> Office, Bank, Professional</p> <p>25 <input type="checkbox"/> Public Utility</p> <p>26 <input type="checkbox"/> School, Library, other Educational</p> <p>27 <input type="checkbox"/> Stores, Mercantile</p> <p>28 <input type="checkbox"/> Tanks, Towers</p> <p>29 <input type="checkbox"/> Other (Specify) _____</p>		
<p><b>B. OWNERSHIP</b></p> <p>8 <input type="checkbox"/> Private (Individual, Corporation, Nonprofit Institution, Etc.)</p> <p>9 <input type="checkbox"/> Public (Federal, State, Local Government)</p>			

<p><b>C. COST</b> <small>(Omit Cents)</small></p> <p>10 Cost of Improvement . . . . \$ _____ <small>To be installed but not included in the above cost:</small></p> <p>a. Electrical . . . . . \$ _____</p> <p>b. Plumbing . . . . . \$ _____</p> <p>c. Heating, Air Conditioning \$ _____</p> <p>d. Other (Elevator, etc.) . . . . \$ _____</p> <p>11 TOTAL Cost of Improvement \$ _____</p>	<p><b>Nonresidential - Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.</b></p> <p>_____</p> <p>_____</p> <p>_____</p>
---	--

**III. SELECTED CHARACTERISTICS of BUILDING - For New Buildings and Additions complete Parts E through L, for Wrecking, complete only Part J, for all others skip to IV.**

<p><b>E. PRINCIPAL TYPE of FRAME</b></p> <p>30 <input type="checkbox"/> Masonry (Wall Bearing)</p> <p>31 <input type="checkbox"/> Wood Frame</p> <p>32 <input type="checkbox"/> Structural Steel</p> <p>33 <input type="checkbox"/> Reinforced Concrete</p> <p>34 <input type="checkbox"/> Other (Specify) _____</p>	<p><b>G. TYPE of SEWAGE DISPOSAL</b></p> <p>40 <input type="checkbox"/> Public or Private Company</p> <p>41 <input type="checkbox"/> Private (Septic Tank, etc.)</p>	<p><b>J. DIMENSIONS</b></p> <p>48 Number of Stories..... _____</p> <p>49 Total Sq Ft of Floor Area, All Floors, Based on Exterior Dimensions or Sq Ft of Roof Area. _____</p> <p>50 Total Land Area, Sq. Ft. .... _____</p>
<p><b>F. PRINCIPAL TYPE of HEATING FUEL</b></p> <p>35 <input type="checkbox"/> Gas</p> <p>36 <input type="checkbox"/> Oil</p> <p>37 <input type="checkbox"/> Electricity</p> <p>38 <input type="checkbox"/> Coal</p> <p>39 <input type="checkbox"/> Other (Specify) _____</p>	<p><b>H. TYPE of WATER SUPPLY</b></p> <p>42 <input type="checkbox"/> Public or Private Company</p> <p>43 <input type="checkbox"/> Private (Well, Cistern)</p>	<p><b>K. NUMBER of OFF STREET PARKING SPACES</b></p> <p>51 Enclosed . . . . . _____</p> <p>52 Outdoors . . . . . _____</p>
<p><b>I. TYPE of MECHANICAL</b></p> <p>Will there be air conditioning?</p> <p>44 <input type="checkbox"/> Yes    45 <input type="checkbox"/> No</p> <p>Will there be an elevator?</p> <p>46 <input type="checkbox"/> Yes    47 <input type="checkbox"/> No</p>	<p><b>L. RESIDENTIAL BUILDINGS ONLY</b></p> <p>53 Number of Bedrooms . . . . . _____</p> <p>54 Number of Bathrooms</p> <p style="padding-left: 40px;">Full . . . . . _____</p> <p style="padding-left: 40px;">Partial . . . . . _____</p>	

Number Street



#### IV. IDENTIFICATION

Homeowner Permits Must List All Subcontractors and Their License Number

##### A. OWNER

Name		Telephone Number (      )	
Address	City	State	Zip Code

##### B. ARCHITECT or ENGINEER

Name		Telephone Number (      )	
Address	City	State	Zip Code

##### C. CONTRACTOR

Name		Telephone Number (      )	
Address	City	State	Zip Code
License Number	Expiration Date	Social Security Number	Federal Employer ID Number (or reason for exemption)
Workers Compensation Insurance Carrier (or reason for exemption)		MESO Employer Number (or reason for exemption)	

#### V. APPLICANT INFORMATION

The applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information.

Name		Telephone Number (      )	
Address	City	State	Zip Code
Federal Employer ID Number / Social Security 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 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. I acknowledge receipt of and agree to comply with the Michigan Building Code.			
Fee Enclosed:			
Signature of Applicant		Date	

Section 23A of the State Construction Code Act of 1972, Act Number 230 of the Public Acts of 1972, being section 125.1523A of the Michigan Compiled Laws, 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 subject to civil fines.

VI. ZONING PLAN EXAMINERS NOTES

District

Use

Front Yard

Side Yard

Side Yard

Rear Yard

Notes

VII. SITE or PLOT PLAN - *For Applicant Use*

