## **BUILDING PERMIT APPLICATION**

Print Clear

HOWARD CHARTER TOWNSHIP 1345 BARRON LAKE RD

NILES, MI 49031

Permit #

## BUILDING OFFICIAL ADAM DAHLGREN

adamjdahlgren@gmail.com

269 998-2765

TAX ID#

Authority: 1972 PA 230					ds, services and o	other reasonable accommodations are				
Penalty: Failure to provide the information may result in	denial of your request. available upon requ	uest to individ	uals with disa	abilities.						
Project or Facility Information  PROJECT NAME		ADDR	ESS							
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOS	B IS LOCATED		CITY			ZIP CODE				
City Village Township OF	:									
COUNTY BETWEEN			ANI	)						
Applicant	-		-		-	-				
NAME		E-MAII	L							
ADDRESS	CITY	STATE	Ш	ZIP CODE	TELEPHONE N	UMBER (Include Area Code)				
					<u> </u>					
Owner of the land in fee on which the build	ilding or structure will be construc	ADDR	FOO							
IVAIVIE		ADDR	.533							
CITY	STATE	ZIP CO	ODE		TELEPHONE N	UMBER (Include Area Code)				
Cost and Fees										
ESTIMATED PROJECT COST										
\$										
Re-Open Expired Permit	\$75.00									
Island Inspection Fee (Where ferries, boats or planes are involved.)	\$50.00									
or planes are involved.)										
	BUILDING PERMIT FEE ENCLOSED (The first \$100.00 of an application is									
□YES □ NO	non-refundable) \$			OR S	TATE ACCOUNT N	UMBER				
Validation – For Department Use Only				Val	lidation Area					
USE GROUP										
TYPE OF CONSTRUCTION										
SQUARE FEET										
APPLICATION FEE (non-refundable) \$										
CERTIFICATE OF OCCUPANCY - YES -	NO \$									
NUMBER OF INSPECTIONS	\$									
TOTAL PERMIT FEE \$										
APPROVAL SIGNATURE										

Residential builder or	Residential mainte	enance and alteration contract	or							
NAME		COMPANY NAME	ADDRESS							
CITY		STATE	ZIP CODE		TELEPHONE NUMBER (Include Area Code)					
STATE OF MICHIGAN LICEN:	SE NUMBER				EXPIRATION DATE					
FEDERAL EMPLOYER ID NUI	MBER (or reason for exemp	otion)	WORKERS COMP INSUR	ANCE CARRIER	(or reason for exemption)					
UNEMPLOYMENT INSURAN	CE AGENCY EMPLOYER	ACCOUNT NUMBER (or reason for exemp	tion)							
Purpose of Project										
NEW BUILDING	ALTERATION	DEMOLITION	П	OUNDATION ON	LY RELOCATION					
ADDITION	REPAIR	MOBILE HOME SET-UP		REMANUFACTUR	=					
Plan Review Required										
professional engineer in square feet of calculated verified by affidavit of the of the proposed work. A buildings or structures of For buildings regulate Plan Examination, the	accordance with 198 d floor area and publ e individual making i pplicant must also su n the same premises d by the Michigan I appropriate fee, an	10, PA 299 as amended. The seal ic works less than \$15,000 in to it, of the specifications for the bulbmit a site plan showing the din s.  Building Code, 2 sets of const d approved before a building	l and signature is not intal construction cost. uilding or structure, and the location documents permit can be issue	required for or Applicant mind full and contact of the properties	ust be sealed and signed by an architect on ne- and two-family dwellings less than 3,500 ust submit a detailed statement in writing amplete copies of the plans drawn to scale roposed building or structure and the other bmitted with a separate Application for					
BCC Plan Review Num			ool Site Plan Revie	v Number (if	different)					
		entify basis for exemption: Michigan Residential Code								
	3 Regulated by the									
ONE FAMILY		TOWNHOUSE NO. OF UNITS			■ DETACHED GARAGE					
TWO OR MORE FAMILY NO. OF UNITS		ATTACHED GAR	AGE	OTHER						
Buildings Regulated I		ilding Code								
(A-1) ASSEMBLY (THEAT  (A-2) ASSEMBLY (RESTA  (A-3) ASSEMBLY (CHUR  (A-4) ASSEMBLY (INDOC  (A-5) ASSEMBLY (OUTDO  (B) BUSINESS  (E) EDUCATION  (F-1) FACTORY (MODER  (F-2) FACTORY (LOW HA	AURANTS, BARS, ETC.) CHES, LIBRARIES, ETC.) OR SPORTS, ETC.) OOR SPORTS, ETC.)	(H-1) HIGH HAZARD (IIII) (H-2) HIGH HAZARD (IIIII) (H-3) HIGH HAZARD (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	DEFLAGRATION) COMBUSTION) (HEALTH HAZARD) HPM) 1 (SUPERVISED) 2 (HOSPITALS ETC.) 3 (PRISONS ETC.)		M) MERCANTILE R-1) RESIDENTIAL 1 (HOTELS, MOTELS) R-2) RESIDENTIAL 2 (MULTIPLE FAMILY) R-3) RESIDENTIAL 3 (1 & 2 FAMILY) R-4) RESIDENTIAL 4 (ASSISTED LIVINIG) S-1) STORAGE 1 (MODERATE HAZARD) S-2) STORAGE 2 (LOW HAZARD) '(U) UTILITY (MISCELLANEOUS)					
WILL THERE BE FIRE SUPPR	RESSION? YES	NO SCOPE OF WORK?								
Type of Construction										
I —	otected Structural Elements on-Rated Structural Elemen	, <u> </u>	• • •	<u> </u>	A - Non-Combustible (Rated Structural Elements) 1HR B - Non-Combustible (Bearing Walls Rated) B - Combustible (All Elements Not Rated)					
C. Dimensions / Data										
FLOOR AREA:	EXISTING	ALTERATIONS	NEW							
BASEMENT				_						
1ST & 2ND FLOOR				_						
3RD FLOOR & ABOVE				_						
TOTAL AREA				_						

Sit	te o	r Ple	ot P	lan	- Fo	r A	Site or Plot Plan - For Applicant Use																									
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## **Local Governmental Agency to Complete This Section ENVIRONMENTAL CONTROL APPROVALS REQUIRED? APPROVED NUMBER** BY DATE A - Zoning ☐ Yes ☐ No ☐ NA **B** - Fire District ☐ Yes ☐ No ☐ NA C - Health Department ☐ Yes ☐ No ☐ NA D - Soil Erosion ☐ Yes ☐ No ☐ NA E - Flood Zone ☐ Yes ☐ No ☐ NA

General: Building work shall not be started until the permit has been issued by the Bureau of Construction Codes. All installations shall be in compliance with the Michigan Building Codes. No work shall be concealed until it has been inspected. The telephone number for the inspector will be provided on the permit form. When ready for an inspection, call the inspector providing as much advance notice as possible and provide the job location, permit number, and contact information. Schedule permitting, the inspector will respond to an inspection request within two (2) business days to schedule the inspection. Inspections are typically performed within five (5) business days subject to the inspection schedule.

**Expiration of Permit:** A permit remains valid as long as work is progressing, and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00.

Where to Submit Application: The Bureau of Construction Codes is responsible for code enforcement in units of government throughout the state which have no local inspection authority and for all state-owned buildings as well as school building construction where a local delegation of authority does not exist. Prior to applying for a permit, please review the Statewide Jurisdiction List for anything other than K-12 Educational Facilities. For K-12 Educational Facilities please review the Local School Construction Enforcement List. This information is updated regularly due to changes in the construction code enforcement authority as they may be conducted by either the state, county, or local unit of government. A permit application must be submitted to the appropriate enforcing agency based upon these lists. Permit applications should be sent to the address on the first page of this application. Questions regarding issued permits may be directed to <a href="mailto:bccpermits@michigan.gov">bccpermits@michigan.gov</a> or 517-241-9313.

	tate relating to persons who are to perform	25.1523a, prohibits a person from conspiring to circumvent the work on a residential building or a residential structure. Violators of
work. I further attest that this applic		(title), attest that the statements, specifications, rrect description of the building or structure, lot or parcel, and proposed 125.1510 and that I am a person authorized under MCL 125.1510(2) to 25.1510(2).
SIGNATURE		DATE