

Sandstone Charter Township

Building Inspector
3345 N. Dearing Rd
Parma, MI 49269
517-787-0071

Application for Building Permit and Plan Examination

Authority: P.A. 230 of 1972 as amended Completion: Mandatory to obtain permit Penalty: Application must be completed, signed, proper fee enclosed or permit will not be issued.	The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap, or political beliefs.
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Applicant to complete all items in section I, II, III, IV, V, and VI
 Note: Separate applications must be made to the appropriate divisions for plumbing, mechanical and electrical work permits.

Address			
City/Village	Township	County	Zip Code
Between	And		
A. Owner or Lessee			
Name		Telephone No.	
Address	City	State	Zip Code
B. Architech or Engineer			
Name		Telephone No.	
Address	City	State	Zip Code
License Number		Expiration Date	
C. Contractor			
Name		Telephone No.	
Address	City	State	Zip Code
Builders License Number		Expiration Date	
Federal Employer ID number or Reason for Exemption			
Workers Comp Insurance Carrier or Reason for Exemption			
MESC Employer Number or Reason for Exemption			
A. Type of Improvement			
1 <input type="checkbox"/> New Building 2 <input type="checkbox"/> Addition 3 <input type="checkbox"/> Alteration 4 <input type="checkbox"/> Repair 5 <input type="checkbox"/> Wrecking 6 <input type="checkbox"/> Mobile Home Set-Up 7 <input type="checkbox"/> Foundation Only 8 <input type="checkbox"/> Premanufacture 9 <input type="checkbox"/> Relocation 10 <input type="checkbox"/> New House 11 <input type="checkbox"/> New House/Garage 12 <input type="checkbox"/> BOCA 13 <input type="checkbox"/> HUD 14 <input type="checkbox"/> Double Wide 15 <input type="checkbox"/> Pole Barn 16 <input type="checkbox"/> Garage 17 <input type="checkbox"/> BOCA Certified <input type="checkbox"/> Yes <input type="checkbox"/> No 18 <input type="checkbox"/> Roof Repair			
B. Review (s) to be performed			
<input type="checkbox"/> Building	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Electrical	<input type="checkbox"/> Energy

Total Cost of Improvement \$ _____

A. Residential-For "Wrecking", Show Most Recent Use

- 1. One Family
- 2. Two or More Family
(No. of Units) _____
- 3. Hotel, Motel
(No. of Units) _____
- 4. Attached Garage
- 5. Detached Garage
- 6. Other

B. Non-Residential For "Wrecking", Show Most Recent Use

- 7. Amusement
- 8. Church, Religion
- 9. Industrial
- 10. Parking Garage
- 11. Service Station
- 12. Hospital, Institutional
- 13. Office, Bank, Professional
- 14. Public Utility
- 15. School, Library, Educational
- 16. Store, Mercantile
- 17. Tank, Towers
- 18. Other

Nonresidential-Describe, in detail proposed use of building, 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.

A. Principal Type of Frame

- 1. Masonry, Wall Bearing
- 2. Wood Frame
- 3. Structural Steel
- 4. Reinforced Concrete
- 5. Other (Exp W/ Att Sheet)

B. Principle Type of Heating Fuel

- 6. Gas
- 7. Oil
- 8. Electricity
- 9. Coal
- 10. Other (Exp w/att sheet)

C. Type of Sewage Disposal

- 11. Public or Private Company
- 12. Septic System

D. Type of Water Supply

- 13. Public or Private Company
- 14. Private Well or Cistern

E. Type of Mechanical

- 15. Will there be air conditioning? Yes No
- 16. Will there be an elevator? Yes No

F. Dimensions

- 17. Number of Stories _____
- 18. Floor Area 1st & 2nd Floor _____
 Living area basement _____
 3rd-10th Floor _____
 11th above floor _____
 Total Land Area (Square Feet) _____ Total area _____

G. Number of Off Street parking Spaces

- 19. Enclosed _____
- 20. Outdoors _____

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

Name		Telephone No.	
Address	City	State	Zip Code
Federal 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.

Section 23A of the State Construction Code Act of 1972. Act No. 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.

Fee Enclosed \$	Or State Account Number
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Signature of Applicant

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 Erosion	<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				

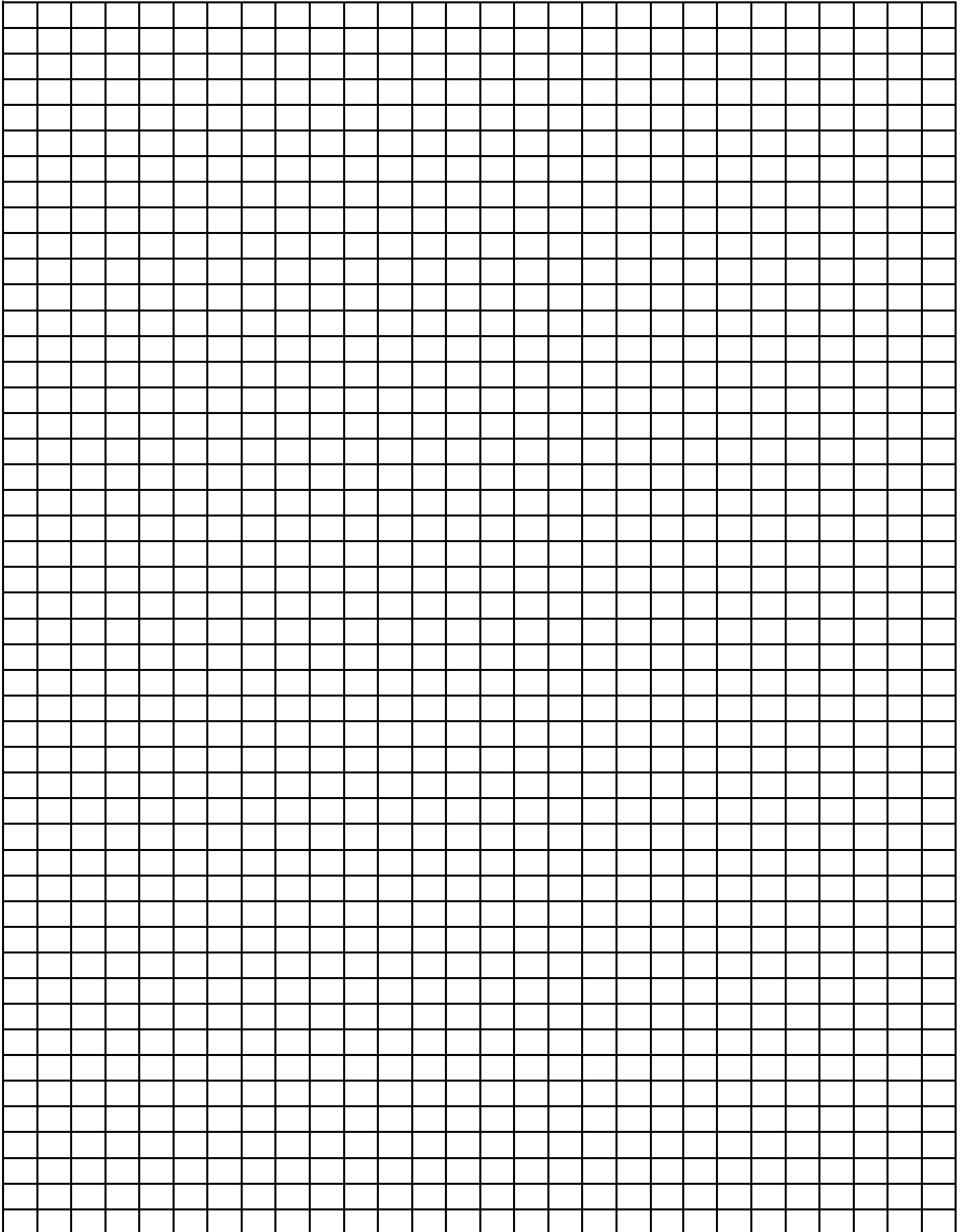
VIII. Validation-For Department Use Only

Notes and Data

Building Permit Number

Issue Date	Approval Signature
Permit Date	Title

TX. Site or Plot Plan - For Applicant Use



Indicate Direction of North Within the circle

1. Show setbacks from property line or rightaway line



2. Show road side if on corner lot