

BUILDING PERMIT INFORMATION
Geneva Township

The following information is required to obtain a building permit:
incomplete applications may be returned

1. A complete Building Permit Application form
2. A detailed site plan (see back of building application)
3. Agent Authorization Form -required if builder obtains permit
4. Three (3) sets of Construction Plans – 2 sets must be full size hardcopy and 1 can be email PDF, if PDF not available, submit 3 full size hardcopy (*one will be returned to be kept on the jobsite*) **INCLUDE ON THE PLANS:**
 - a: Detailed foundation plan
 - b: All significant elevations (side views)
 - c: Floor plans – including, but not limited to: use of all rooms and dimensions; window and door sizes; stairway structural details (*if applicable*); deck structural details (*if applicable*)
 - d: Cross section of one wall from footing to peak
 - e: Identify north elevation as (N)
 - f: Indicate snow-loading capacity. Be sure to show all dimensions
 - g. Energy code insulation values

Note: Items required prior to rough-in: 1) Manufacturers truss diagrams 2) Mechanical Design Criteria (Manual S & J)

5. Septic and Well Permits
Permit is required to hook to an existing septic and/or well
VanBuren County Health Department – 269-621-3143
Or local municipal water/sewer authority
***Health Dept approval is required: for adding bedrooms, water softener discharge, ejector/grinder pump, oversized tub/jacuzzi, basement plumbing

6. DRIVEWAY PERMIT
Van Buren County Road Commission – 269-674-8011
MDOT – properties on Michigan Highways
**A driveway permit is required in VanBuren County even if there is an existing driveway.

7. PROOF OF OWNERSHIP
examples: deed or land contract, tax bill

► see reverse side

8. **SOIL EROSION CONTROL PERMIT (SESC)**
A permit is required if soil disturbance is within 500 feet of a waterway, lake, river, stream, pond, body of water, storm sewer, County Drain or if disturbance one (1) or more acres
Van Buren County – 269-657-8241

 9. **Other items** that may be required: *not limited to:*
 1. Fire Department (*commercial projects*)
 2. EGLE permit (*wetland, floodplain, etc*)
 3. Health Department (Food Service) – *if project includes food service, food preparation, new commercial kitchen, etc*
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**WHEN YOU HAVE ALL THE ABOVE REQUIRED
INFORMATION SUBMIT TO:**

Michigan Township Services-Allegan, INC.
111 Grand Street
Allegan MI 49010

269-673-3239 or 1-800-626-5964
fax – 269-673-9583
mtsallegran@frontier.com
www.michigantownshipservices.org

APPLICATION FOR BUILDING PERMIT

AND PLAN EXAMINATION

RETURN COMPLETED FORM TO BUILDING DEPARTMENT

111 GRAND STREET

ALLEGAN, MI 49010

Phone 269-673-3239 or 1-800-626-5964 Fax: 269-673-9583

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

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

I. PROJECT INFORMATION				
PROJECT NAME		JOB ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	
BETWEEN		AND		
ESTIMATED PROJECT COST		PROPERTY TAX ID NUMBER		
II. IDENTIFICATION				
A. OWNER OR LESSEE				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
B. ARCHITECT OR ENGINEER				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
LICENSE NUMBER			EXPIRATION DATE	
C. CONTRACTOR				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
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				
III. TYPE OF IMPROVEMENT AND PLAN REVIEW				
A. TYPE OF IMPROVEMENT				
1. <input type="checkbox"/> NEW BUILDING	3. <input type="checkbox"/> MOBILE HOME SET-UP	5. <input type="checkbox"/> SIGN	7. <input type="checkbox"/> DEMOLITION	9. <input type="checkbox"/> RELOCATION
2. <input type="checkbox"/> ALTERATION/REPAIR	4. <input type="checkbox"/> MANUFACTURED HOME	6. <input type="checkbox"/> ADDITION	8. <input type="checkbox"/> FOUNDATION ONLY	10. <input type="checkbox"/> OTHER
B. REVIEW(S) TO BE PERFORMED				
<input type="checkbox"/> BUILDING	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> FOUNDATION

IV. PROPOSED USE OF BUILDING					
A. RESIDENTIAL					
1. <input type="checkbox"/> ONE FAMILY	3. <input type="checkbox"/> TOWNHOUSE NO. OF UNITS _____		5. <input type="checkbox"/> DETACHED GARAGE		
2. <input type="checkbox"/> TWO OR MORE FAMILY NO. OF UNITS _____	4. <input type="checkbox"/> ATTACHED GARAGE		6. <input type="checkbox"/> OTHER		
B. COMMERCIAL					
7. <input type="checkbox"/> HOTEL/MOTEL	11. <input type="checkbox"/> SERVICE STATION		15. <input type="checkbox"/> APARTMENT		
8. <input type="checkbox"/> ASSEMBLY	12. <input type="checkbox"/> HOSPITAL, INSTITUTIONAL		16. <input type="checkbox"/> STORE, MERCANTILE		
9. <input type="checkbox"/> INDUSTRIAL	13. <input type="checkbox"/> OFFICE, BANK, PROFESSIONAL		17. <input type="checkbox"/> TANKS, TOWERS		
10. <input type="checkbox"/> STORAGE	14. <input type="checkbox"/> RESTAURANT/BAR		18. <input type="checkbox"/> OTHER, SIGN		
DESCRIBE IN DETAIL PROPOSED PROJECT AND USE:					
V. SELECTED CHARACTERISTICS OF BUILDING					
A. PRINCIPAL TYPE OF FRAME					
1. <input type="checkbox"/> MASONRY, WALL BEARING	2. <input type="checkbox"/> WOOD FRAME	3. <input type="checkbox"/> STRUCTURAL STEEL	4. <input type="checkbox"/> REINFORCED CONCRETE	5. <input type="checkbox"/> OTHER	
B. PRINCIPAL TYPE OF HEATING FUEL					
6. <input type="checkbox"/> GAS	7. <input type="checkbox"/> OIL	8. <input type="checkbox"/> ELECTRICITY	9. <input type="checkbox"/> COAL	10. <input type="checkbox"/> OTHER	
C. TYPE OF SEWAGE DISPOSAL					
11. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY			12. <input type="checkbox"/> SEPTIC SYSTEM		
D. TYPE OF WATER SUPPLY					
13. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY			14. <input type="checkbox"/> PRIVATE WELL OR CISTERN		
E. TYPE OF MECHANICAL					
15. <input type="checkbox"/> WILL THERE BE AIR CONDITIONING? <input type="checkbox"/> YES <input type="checkbox"/> NO			16. WILL THERE BE FIRE SUPPRESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO		
F. DIMENSIONS/DATA					
	WIDTH		LENGTH	HEIGHT	
17. NUMBER OR STORIES	_____	21. FLOOR AREA:	EXISTING	ALTERATIONS	NEW
18. USE GROUP	_____	BASEMENT	_____	_____	_____
19. CONST. TYPE	_____	1ST & 2ND FLOOR	_____	_____	_____
20. NO. OF OCCUPANTS	_____	3RD-10TH FLOOR	_____	_____	_____
		11TH-ABOVE	_____	_____	_____
		TOTAL AREA	_____	_____	_____
G. NUMBER OF OFF STREET PARKING SPACES					
22. ENCLOSED _____			23. OUTDOORS _____		

VI. APPLICANT INFORMATION

NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
EMAIL ADDRESS				

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.

Section 23a of the state of 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 ►

VII. BUILDING DEPARTMENT USE ONLY

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

USE GROUP _____	BASE FEE _____
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____
SQUARE FEET _____	
APPROVAL SIGNATURE _____	
TITLE _____	DATE _____

BUILDING APPLICATION/ZONING

Site Plan: **(Please read carefully and complete)**. Use the space below, or on a separate sheet of paper, to draw a diagram showing all of the following items.

1. The dimensions of the lot or acreages. (all sides)
 2. The location, distances to lot lines, of all existing and proposed structures.
 3. The dimensions of all existing and proposed structures.
 4. The distances between all existing structures.
 5. The location of all roads bordering or on the property.
 6. The location of any power and gas lines on property.
 7. The location of any lakes, rivers, streams, or wetland on or near property.
 8. The location of any easements on the property.
 9. A north arrow indicating the direction of north.
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*****Do not write below this line*****

Required setbacks

Front_____ft. Rear_____ft. Side Right._____ft. Side Left_____ft.

Lot width_____ft. Lot Area_____Sq. ft. Living Area_____

Dist. Between bldgs._____ft. Zoning Dist._____

Approved_____ Denied_____

Signature_____ Date_____

Reason Denied_____

Michigan Township Services-Allegan. Inc
111 Grand Street, Allegan MI 49010
1-800-626-5964 * 269-673-3239
Fax 269-673-9583
Email mtsallegan@frontier.com

Agent Authorization

Date: _____

Job Address: _____

City or Township: _____

This is to inform you that I, (owner name) _____,
as owner of the above referenced property authorize (agent name)
_____, to act as my agent in seeking / obtaining
various permits and approvals on my behalf.

These include:

- Various Township/City Zoning and Building approvals
- Other County or State permit approvals
- Others as needed

Property Owner Signature and Phone Number

This completed form must be submitted with a zoning/building permit application. Permits will not be issued without it.