

FRANKENLUST TOWNSHIP

2401 Delta Road, Bay City, MI 48706-9340
PH (989) 686-5300 FAX (989) 686-5370

BUILDING PERMIT APPLICATION

Applicant to complete numbered spaces only. All Contractors Must Register with the Township

1. JOB ADDRESS		PARCEL NUMBER	
2. OWNER		PHONE	
3. OWNER'S MAILING ADDRESS		PHONE	
4. CONTRACTOR		PHONE	LICENSE NO.
5. CONTRACTOR'S MAILING ADDRESS			
6. ARCHITECT OR DESIGNER	MAILING ADDRESS	PHONE	LICENSE NO.
7. ENGINEER	MAILING ADDRESS	PHONE	LICENSE NO.
8. USE OF BUILDING		9. CLASS OF WORK: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR	
10. DESCRIBE WORK:		11. VALUATION OF WORK: \$	
12a. CHANGE OF USE FROM			
12b. CHANGE OF USE TO			

<u>CONTRACTOR</u>			CHECK #		
			PERMIT FEE \$		
			PLAN CHECK FEE \$		
NAME	PHONE NO.	TYPE OF CONST.	OCCUPANCY GROUP	DIVISION	
ADDRESS		SIZE OF BLDG (SQ FTG)	NO. OF STORIES	MAX OCC. LOAD	
CITY	STATE	ZIP CODE	FIRE ZONE	USE ZONE	FIRE SPRINKLERS REQUIRED? Y N
BUILDERS LICENSE NO.	EXPIRATION DATE	NO. OF DWELLING UNITS	OFF STREET PARKING SPACES COVERED UNCOVERED		
FED EMPLOYER ID # OR REASON FOR EXEMPTION	SPECIAL APPROVALS		REQUIRED	RECEIVED	NOT REQUIRED
	ZONING PERMIT				
WORKERS COMP INS CARRIER OR REASON FOR EXEMPTION	HEALTH DEPT.				
	FIRE DEPT.				
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION	SOIL REPORT				
	ENGINEERING				
	WATER				
	CROSS CONNECTION				
SIGNATURE OF OWNER † OR BUILDER	SOIL EROSION				
	OTHER (SPECIFY)				
DATE †	PLANNING COMM.				

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.
 *Section 23a of the State Construction Code Act 1972, Act No. 230 of 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 perform work on a residential building or a residential structure. Violators of section 23a are subjected to civil fines."

SIGNATURE _____ DATE _____
BUILDING INSPECTOR OR AUTHORIZED REPRESENTATIVE

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH
 WHITE-Inspector PINK-Applicant GOLDENROD-Temp. File CANARY-Assessor
Reverse Side Must Be Completed.

INSPECTION RECORD

<u>INSPECTION</u>	<u>DATE</u>	<u>INSPECTOR</u>	<u>REMARKS</u>
Foundation			
Framing			
FINAL			

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY:	PLANS CHECKED BY:	APPROVED FOR ISSUANCE BY:
<u>NOTICE</u>		
<p>THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.</p> <p>I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPILED WITH WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</p>		

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE
 USE SPACE BELOW FOR NOTES, FOLLOW-UP, ETC.
