

# Application for Building Permit

Brady Township

Mail to: 1014 Skyview Dr.

Flushing MI 48433

Authority: 1972 PA 230  
Completion: Mandatory to Obtain Permit  
Penalty: Permit Will Not Be Issued

Applicant to Complete All Items in Sections I, II, III, IV, V and VI

Note: Separate Applications Must Be Completed for Plumbing, Mechanical and Electrical Work Permits

<b>I. PROJECT INFORMATION</b>				
Project Name		Address		
City	Township	County	Zip Code	
Between	And			
<b>II. IDENTIFICATION</b>				
<b>A. OWNER OR LESSEE</b>				
Name		Address		
City	State	Zip Code	Telephone Number	
<b>B. ARCHITECT OR ENGINEER</b>				
Name		Address		
City	State	Zip Code	Telephone Number	
License Number			Expiration Date	
<b>C. CONTRACTOR</b>				
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				
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>				
<b>A. TYPE OF IMPROVEMENT</b>				
1. <input type="checkbox"/> New Building	3. <input type="checkbox"/> Alteration	5. <input type="checkbox"/> Demolition	7. <input type="checkbox"/> Foundation Only	9. <input type="checkbox"/> Relocation
2. <input type="checkbox"/> Addition	4. <input type="checkbox"/> Repair	6. <input type="checkbox"/> Mobile Home Set up	8. <input type="checkbox"/> Premanufacture	10. <input type="checkbox"/> Special Inspection
<b>B. PLAN REVIEW REQUIRED</b>				

Property Tax ID \_\_\_\_\_

Building Permit No. \_\_\_\_\_

Construction Value \_\_\_\_\_

Building Permit Fee \_\_\_\_\_

Date \_\_\_\_\_

**IV. PROPOSED USE OF BUILDING****A. RESIDENTIAL**

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**

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.  Tanks, Towers  
 18.  Other \_\_\_\_\_

NON RESIDENTIAL- 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.

**V. SELECTED CHARACTERISTICS OF BUILDING****A. PRINCIPAL TYPE OF FRAME**

1.  Masonry, Wall Bearing  
 2.  Wood Frame  
 3.  Structural Steel  
 4.  Reinforced Concrete  
 5.  Other

**B. PRINCIPAL TYPE OF HEATING FUEL**

6.  Gas  
 7.  Oil  
 8.  Electricity  
 9.  Coal  
 10.  Other

**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 Fire Suppression?  YES  NO

**F. DIMENSIONS / DATA**

- |                             |  |          |             |       |
|-----------------------------|--|----------|-------------|-------|
| 17. Number of Stories _____ | 21. Floor Area:                          | Existing | Alterations | New   |
| 18. Use Group _____         | Basement                                 | _____    | _____       | _____ |
| 19. Const. Type _____       | 1 <sup>st</sup> & 2 <sup>nd</sup> Floor  | _____    | _____       | _____ |
| 20. No. of Occupants _____  | 3 <sup>rd</sup> – 10 <sup>th</sup> Floor | _____    | _____       | _____ |
|                             | 11 <sup>th</sup> – Above                 | _____    | _____       | _____ |
|                             | Total Area                               | _____    | _____       | _____ |

**G. NUMBER OF OFF STREET PARKING SPACES**

22. Enclosed \_\_\_\_\_  
 23. Outdoors \_\_\_\_\_

**VI. APPLICANT INFORMATION**

**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 I.D. 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 / 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 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 X**

Building Permit Fee Enclosed \$ \_\_\_\_\_ Date \_\_\_\_\_

**VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION**

**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 _____	

SITE OR PLOT PLAN

The Site or plot plan sheet must be used to show where the building will sit on the property. Lot lines must be shown with dimensions from all four sides. Do not measure from the center of the road for the front lot line. Use the road right-of-way line to measure setback from. A separate sheet of paper is attached to show a floor plan.

North

W  
e  
s  
t

E  
a  
s  
t

South

## FLOOR PLAN

If unit is a manufactured or modular home, you must provide a copy of the unit spec sheet and floor plan.

