



APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

RETURN COMPLETED FORM TO: BUILDING DEPARTMENT

2054 N. M-40 Hwy

ALLEGAN, MI 49010

Phone 269-673-5962 Cell: 269-806-8776 Fax: 269-686-8302

APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V, AND VI.
NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING,
MECHANICAL, AND ELECTRICAL WORK PERMITS.

I. PROJECT INFORMATION				
PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
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"/> ALTERATION	5. <input type="checkbox"/> DEMOLITION	7. <input type="checkbox"/> FOUNDATION ONLY	9. <input type="checkbox"/> RE-ROOF
2. <input type="checkbox"/> ADDITION	4. <input type="checkbox"/> REPAIR	6. <input type="checkbox"/> MOBILE HOME SETUP	8. <input type="checkbox"/> PREMANUFACTURE	10. <input type="checkbox"/> DECK/PORCH
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"/> POLE STRUCTURE		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. NON-RESIDENTIAL					
7. <input type="checkbox"/> AMUSEMENT		11. <input type="checkbox"/> SERVICE STATION		15. <input type="checkbox"/> SCHOOL, LIBRARY, EDUCATIONAL	
8. <input type="checkbox"/> CHURCH, RELIGION		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"/> PARKING GARAGE		14. <input type="checkbox"/> PUBLIC UTILITY		18. <input type="checkbox"/> OTHER	
DESCRIBE IN DETAIL PROPOSED USE OF BUILDING. IF USE OF EXISTING BUILDING IS BEING CHANGED, ENTER PROPOSED 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					
5. <input type="checkbox"/> GAS		7. <input type="checkbox"/> OIL		8. <input type="checkbox"/> ELECTRICITY	
9. <input type="checkbox"/> ALTERNATIVE		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. 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	
17. NUMBER OF STORIES		21. FLOOR AREA		HEIGHT	
G. NUMBER OF OFF STREET PARKING SPACES					
22. ENCLOSED			21. OUTDOORS		

VI. APPLICANT INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPUCATION 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 HISMER 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 drwmvent 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 APPUCANT

PLAN REVIEW FEE ENCLOSED \$

BUILDING PERMIT FEE ENCLOSED \$

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				
1- VARIANCE GRANTED	<input type="checkbox"/> YES <input type="checkbox"/> NO				
J - OTHER	<input type="checkbox"/> YES <input type="checkbox"/> NO				

VII. 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 acreage. (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 wetlands on or near property.
 8. The location of any easements on the property.
 9. A north arrow indicating the direction of north.
-

Do not write below this line*****

Required setbacks

Front _____ ft Rear _____ ft. Side RT. _____ Left _____
Lot width _____ ft Lot area _____ sq. ft. Living Area _____
Dist. between bldgs. _____ ft Zoning Dist. _____
Approved _____ Denied _____
Signature _____ Date _____
Reason Denied _____