

BUILDING AND PLAN EXAMINATION - PERMIT APPLICATION

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APPLICATION 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. PROJECT INFORMATION

PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND	JOB SITE PHONE NUMBER	

II. IDENTIFICATION**A. OWNER OR LESSEE**

NAME	ADDRESS	P.O./STATE
	ZIP	
PHONE NUMBER	LICENSE NUMBER	EXPIRATION DATE

B. ARCHITECT OR ENGINEER

NAME	ADDRESS	P.O./STATE
	ZIP	
PHONE NUMBER	LICENSE NUMBER	EXPIRATION DATE

C. CONTRACTOR

NAME	ADDRESS	CITY/STATE
	ZIP	
PHONE NUMBER	FAX NUMBER	E-MAIL ADDRESS
BUILDERS LICENSE NUMBER	EXPIRATION DATE	
FEDERAL EMPLOYER ID NUMBER	WORKERS COMP NUMBER	MESC EMPLOYER NUMBER

III. TYPE OF IMPROVEMENT AND PLAN REVIEW (14 inch x 17 inch plans appreciated)**A. TYPE OF IMPROVEMENT**

<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> ALTERATION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> FOUNDATION ONLY	<input type="checkbox"/> RELOCATION
<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR	<input type="checkbox"/> MOBILE HOME SET-UP	<input type="checkbox"/> PREMANUFACTURE	<input type="checkbox"/> SPECIAL INSPECTION

B. REVIEWS(S) TO BE PERFORMED

<input type="checkbox"/> BUILDING	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> FOUNDATION
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IV. PROPOSED USE OF BUILDING

A. RESIDENTIAL

<input type="checkbox"/> ONE FAMILY	<input type="checkbox"/> ATTACHED GARAGE	<input type="checkbox"/> DETACHED GARAGE
<input type="checkbox"/> TWO OR MORE FAMILY NO. OF UNITS _____		<input type="checkbox"/> OTHER

B. NON-RESIDENTIAL

NONRESIDENTIAL-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

<input type="checkbox"/> MASONRY, WALL BEARING	<input type="checkbox"/> WOOD FRAME	<input type="checkbox"/> STRUCTURAL STEEL	<input type="checkbox"/> REINFORCED CONCRETE	<input type="checkbox"/> OTHER
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B. TYPE OF MECHANICAL

WILL THERE BE AIR CONDITIONING	<input type="checkbox"/> YES	<input type="checkbox"/> NO	WILL THERE BE FIRE SUPPRESSION	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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C. PRINCIPAL TYPE OF HEATING FUEL

<input type="checkbox"/> GAS	<input type="checkbox"/> OIL	<input type="checkbox"/> ELECTRICITY	<input type="checkbox"/> COAL	<input type="checkbox"/> OTHER
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D. TYPE OF SEWAGE DISPOSAL

<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY	<input type="checkbox"/> SEPTIC SYSTEM
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E. TYPE OF WATER SUPPLY

<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY	<input type="checkbox"/> PRIVATE WELL OR CISTERN
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F. DIMENSIONS / DATA

	FLOOR AREA: SQUARE FT.	EXISTING	ALTERATIONS	NEW
NUMBER OF STORIES _____				
USE GROUP _____	BASEMENT	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
	GARAGE	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
	1ST & 2ND FLOOR	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
	LIVING AREA ABOVE	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
CONST. TYPE _____	GARAGE	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
	3RD FLOOR	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.
NO. OF OCCUPANTS _____	FULL BATHS	_____ #	_____ #	_____ #
	1/2 BATH	_____ #	_____ #	_____ #
PROJECT TOTAL COSTS _____	TOTAL AREA	_____ Sq. Ft.	_____ Sq. Ft.	_____ Sq. Ft.

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 NO.	
ADDRESS	PO	STATE	ZIP CODE

FEDERAL I.D.. 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/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:

PLAN REVIEW FEE ENCLOSED \$ _____ BUILDING PERMIT FEE ENCLOSED \$ _____

VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS					
	REQUIRED?	APPROVED	DATE	NUMBER	BY
A - ZONING	___ YES ___ NO				
B - FIRE DISTRICT	___ YES ___ NO				
C - POLLUTION CONTROL	___ YES ___ NO				
D - NOISE CONTROL	___ YES ___ NO				
E - SOIL EROSION	___ YES ___ NO				
F - FLOOD ZONE	___ YES ___ NO				
G - WATER SUPPLY	___ YES ___ NO				
H - SEPTIC SYSTEM	___ YES ___ NO				
I - VARIANCE GRANTED	___ YES ___ NO				
J - OTHER	___ YES ___ NO				

VIII. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP _____	BASE FEE _____
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____
SQUARE FEET _____	

APPROVAL SIGNATURE _____

TITLE _____ DATE _____

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IX. SITE OR PLOT PLAN - FOR APPLICANT USE

A large grid of graph paper, consisting of 20 columns and 30 rows of small squares, intended for drawing a site or plot plan. The grid is empty and occupies the majority of the page below the section header.