## BUILDING AND PLAN EXAMINATION PERMIT APPLICATION Page 1 of 4

Marshall Township

## MARSHALL TOWNSHIP

13551 MYRON AVERY DRIVE • MARSHALL, MI 49068

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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, ELECTRICAL WORK AND PROJECT INFORMATION

PROJECT NAME ADDRESS  CITY VILLAGE TOWNSHIP  BETWEEN AND		COUNTY		ZIP CODE		
				7IP CODE		
BETWEEN AND		<u> </u>		211 0002		
		J	OB SITE HOME	E NUMBER		
II. IDENTIFICATION		•				
A. OWNER OR LESSEE						
NAME ADDRESS	S P.O./STATE					
ZIP						
PHONE NUMBER LICENSE NUMBER	ISE NUMBER			EXPIRATION DATE		
B. ARCHITECT OR ENGINEER						
NAME ADDRESS	SS P.O./STATE					
ZIP						
PHONE NUMBER LICENSE NUMBER	ISE NUMBER			EXPIRATION DATE		
C. CONTRACTOR		•				
NAME ADDRESS	PRESS			CITY/STATE		
ZIP						
PHONE NUMBER FAX NUMBER	BER			E-MAIL ADDRESS		
BUILDERS LICENSE NUMBER EXPIRATION DATE						
FEDERAL EMPLOYER ID NUMBER WORKERS CO	WORKERS COMP NUMBER MESC EMPLOYER NUMBER					
III TYPE OF IMPROVEMENT AND DI AN DEVIEW (14 inch v 17 in	oh nlana ann	rasistad\				
III. TYPE OF IMPROVEMENT AND PLAN REVIEW (14 inch x 17 in	ich pians appi	reciateu)	)			
A. TYPE OF IMPROVEMENT			1			
□ NEW BUILDING □ ALTERATION □ DEMOLITION	□ FOUN	☐ FOUNDATION ONLY		□ RELOCATION		
□ ADDITION □ REPAIR □ MOBILE HOME SET-UP	☐ PREM	□ PREMANUFACT		☐ SPECIAL INSPECTION		
B. REVIEWS(S) TO BE PERFORMED (Additional Permits will be required)						
□ BUILDING □ ELECTRICAL □ MECHANICAL	□ PLUME	BING		FOUNDATION		

BUILDI	NG ANI	D PLAN E	XAMINATI	ON PE	RMIT APF	PLICATION	Page 2 of 4		
IV. PROPOSED USE OF BUI	LDING								
A. RESIDENTIAL									
☐ ONE FAMILY			□ATTACHED	□ ATTACHED GARAGE □ DETACHED GARA					
☐ TWO OR MORE FAMILY NO. OF UNITS			□ OTHER						
B. NON-RESIDENTIAL									
NONRESIDENTIAL-DESCRIBE IN DET IF USE OF EXITING BUILDING IS BEIN									
V. SELECTED CHARACTERI	STICS (	F BUILDII	NG						
A. PRINCIPAL TYPE OF FR	AME		_						
☐ MASONRY, WALL BEARING	□W00D FRAME		☐ STRUCTURAL STEEL ☐ REIN		NFORCED CONCRETE	□ OTHER			
B. TYPE OF MECHANICAL			1						
WILL THERE BE ☐ YES		WILL THERE BE ☐ YES							
AIR CONDITIONING □ NO			FIRE SUPPRESSION □ NO						
C. PRINCIPAL TYPE OF HEATING FUEL									
□ GAS □ □ C		□ ELECTRICITY			□ COAL □ OTHER				
D. TYPE OF SEWAGE DISPO	USAL				C SEDTIC S	VSTEM			
E. TYPE OF WATER SUPPLY					☐ SEPTIC SYSTEM				
□ PUBLIC OR PRIVATE COMPANY	<u> </u>		□ PRIVΔ	TE WELL (	OR CISTERN				
F. DIMENSIONS/DATA					JIT OIGTEIN				
1. DIMENSIONO/DATA		FLOOR A		EXIS	STING	ALTERATIONS	NEW		
NUMBER OF STORIES		BASEMEN	Γ		Sq. Ft.	Sq. Ft.	Sq. Ft.		
USE GROUP		GARAGE			Sq. Ft.	Sq. Ft.	Sq. Ft.		
USE UNOUP		1ST & 2ND	FLOOR		Sq. Ft.	Sq. Ft	Sq. Ft.		
CONST. TYPE		LIVING ARE	EA ABOVE		Sq. Ft.	Sq. Ft	Sq. Ft.		
		GARAGE			Sq. Ft.	Sq. Ft	Sq. Ft.		
NO. OF OCCUPANTS		3RD FLOOR			Sq. Ft.	Sq. Ft	Sq. Ft.		
PROJECT TOTAL COSTS		FULL BATHS			Sq. Ft.	Sq. Ft.	Sq. Ft.		
		1/2 BATH			Sq. Ft.	Sq. Ft	Sq. Ft.		
		TOTAL AR	EA		Sq. Ft.	Sq. Ft.	Sq. Ft.		

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VI. APPLICANT INFORMATION	ON						
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.							
NAME			TELEF	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 I	FEE ENCLOSE	D \$			
VII. LOCAL GOVERNMENTAL	AGENCY TO COMPI			T			
		CONTROL APPROVAL					
	REQUIRED?	APPROVED	DATE	NUMBER	BY		
A - ZONING	☐ YES ☐ NO	☐ YES ☐ NO					
B - FIRE DISRICT	☐ YES ☐ NO	☐ YES ☐ NO					
C - POLLUTION CONTROL	☐ YES ☐ NO	☐ YES ☐ NO					
D - NOISE CONTROL	☐ YES ☐ NO	☐ YES ☐ NO					
E - SOIL EROSION	☐ YES ☐ NO	☐ YES ☐ NO					
F - FLOOD ZONE	☐ YES ☐ NO	☐ YES ☐ NO					
G - WATER SUPPLY	☐ YES ☐ NO	☐ YES ☐ NO					
H - SEPTIC SYSTEM	☐ YES ☐ NO	☐ YES ☐ NO					
I - VARIANCE GRANTED	☐ YES ☐ NO	☐ YES ☐ NO					
J - OTHER	☐ YES ☐ NO	☐ YES ☐ NO					
VIII. VALIDATION - FOR DEPARTMENT USE ONLY							
USE GROUP		BASE FEE_					
TYPE OF CONSTRUCTION		INSPECTIO					
SQUARE FEET							
APPROVAL SIGNATURE							
TITLE				DATE			

