

**APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION****Sanilac County**

**Department of Construction**  
**Soil Erosion & Sedimentation Control Agency**  
 60 W. Sanilac Avenue, Room 210, Sandusky, MI 48471  
 Phone (810) 648-4664 Fax (810) 648-5110

AUTHORITY: P.A. 230 OF 1972, AS AMENDED  
 COMPLETION: MANDATORY TO OBTAIN PERMIT  
 PENALTY: PERMIT WILL NOT BE ISSUED

THE DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES WILL NOT  
 DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX,  
 RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP, OR  
 POLITICAL BELIEFS.

**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**

<b>I. PROJECT INFORMATION</b>					
PROJECT NAME			ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE	
BETWEEN		AND			
<b>II. IDENTIFICATION</b> <span style="float:right">Property ID #:</span>					
<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. NEW BUILDING	3. ALTERATION	5. DEMOLITION	7. FOUNDATION ONLY	9. RELOCATION	
2. ADDITION	4. REPAIR	6. MOBILE HOME SET -UP	8. PREMANUFACTURE	10. SPECIAL INSPECTION	
<b>B. REVIEW(S) TO BE PERFORMED</b>					
BUILDING	ELECTRICAL	MECHANICAL	PLUMBING	FOUNDATION	

**IV. PROPOSED USE OF BUILDING**

**A. RESIDENTIAL**

ONE FAMILY	DETACHED GARAGE	PERMIT FEE: HOME/ADDITION	PLAN REVIEW
TWO OR MORE FAMILY	DECK/PORCH	GARAGE	ADMIN FEE
NO. OF UNITS _____	ADDITION	DECK/PORCH	BOND
	OTHER	OTHER	
ATTACHED GARAGE	OTHER	TOTAL _____	

**B. NON-RESIDENTIAL**

AMUSEMENT	SERVICE STATION	SCHOOL, LIBRARY, EDUCATIONAL
CHURCH, RELIGION	HOSPITAL, INSTITUTIONAL	STORE, MERCANTILE
INDUSTRIAL	OFFICE, BANK, PROFESSIONAL	TANKS, TOWERS
PARKING GARAGE	PUBLIC UTILITY	OTHER

NONRESIDENTIAL-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 HEARING	2 WOOD FRAME	3 STRUCTURAL STEEL	4 REINFORCED CONCRETE	5 OTHER
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**B. PRINCIPAL TYPE OF HEATING FUEL**

6 GAS	7 OIL	8 ELECTRICITY	9 COAL	10 OTHER
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**C. TYPE OF SEWAGE DISPOSAL**

11. PUBLIC OR PRIVATE COMPANY	12. SEPTIC SYSTEM
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**D. TYPE OF WATER SUPPLY**

13. PUBLIC OR PRIVATE COMPANY	14. PRIVATE WELL OR CISTERN
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**E. TYPE OF MECHANICAL**

15. WILL THERE BE AIR CONDITIONING?	YES	NO	16. WILL THERE BE FIRE SUPPRESSION?	YES	NO
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**F. DIMENSIONS/DATA**

17. NUMBER OF STORIES _____	21. FLOOR AREA:	EXISTING	ALTERATIONS	NEW
18. USE GROUP _____	BASEMENT	_____	_____	_____
19. CONSTRUCTION TYPE _____	1ST & 2ND FLOOR	_____	_____	_____
20. NUMBER OF OCCUPANTS _____	GARAGE	_____	_____	_____
	DECK/PORCH	_____	_____	_____
	ADDITION	_____	_____	_____
	OTHER	_____	_____	_____
	TOTAL AREA	_____	_____	_____

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

22. ENCLOSED _____	23. OUTDOORS _____
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**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 \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Alternate Contact \_\_\_\_\_ Alternate Phone 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**

PERFORMANCE BOND FOR BUILDING: 1 and 2 Family homes \$400.00 Pre-manufacture/mobile homes \$150.00 Alterations to buildings \$100.00 All other commercial/industrial \$600.00	Special Local Requirement, building permit must be obtained from the Department of Construction, 60 W. Sanilac, Room 210, (810) 648-4664, BEFORE construction or placement of Mobile Unit begins. Plumbing, Electrical and Mechanical Permits are required and must conform to the Michigan Energy Code. One copy of print/drawing to remain on file in this office during construction process.
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**VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION**

**ENVIRONMENTAL CONTROL APPROVALS - HOMEOWNER OR CONTRACTOR'S RESPONSIBILITY**

DATE	REQUIRED?	APPROVED	NUMBER	BY
<b>A - PART 91 SOIL EROSION</b> Working within 500' of Lake river or stream - to verify if High Risk -Property I.D.No. First Contact (810) 648-4664 IF YES - CONTACT DEQ (517) 373-1952	YES NO			
<b>B - PART 91 SOIL EROSION</b> Disturbs one acre or more Contact - Sanilac County Land Use (810) 648-4664	YES NO			
<b>C - PART 303 SOIL EROSION</b> Work in Wetlands Contact: DEQ (989) 686-8025 Ext #8365	YES NO			
<b>D - PART 31 SOIL EROSION</b> Floodplain/Property flooding Contact: DEQ (989) 686-8025 Ext #8364	YES NO			
<b>E - HEALTH DEPARTMENT</b> Contact: (810) 648-2150 Ext #124 Well Septic	YES NO YES NO			
<b>F - ZONING REQUIRED</b> Remain the Same Variance Granted Other	YES NO YES NO YES NO			

USE GROUP \_\_\_\_\_ BASE FEE \_\_\_\_\_

TYPE OF CONSTRUCTION \_\_\_\_\_ SQUARE FEET \_\_\_\_\_

APPROVAL SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

**NOTE: YOU MUST HAVE A DRAWING WITH COMPLETE FRAMING DETAILS OF CONSTRUCTION FOR THE BUILDING INSPECTOR TO GO OVER WITH YOU BEFORE A PERMIT CAN BE ISSUED.**