

## APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

## Medina Township Building Department

Building Inspector: Robert Hackett (517) 206-6947

AUTHORITY: P.A. 230 OF 1972, AS AMENDED  
 COMPLETION: MANDATORY TO OBTAIN PERMIT  
 PENALTY: APPLICATION MUST BE COMPLETED, SIGNED PROPER FEE  
 ENCLOSED OR PERMIT WILL NOT BE ISSUED

THE DEPARTMENT OF LABOR 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 MADE TO THE APPROPRIATE DIVISION  
 FOR PLUMBING, MECHANICAL AND ELECTRICAL WORK PERMITS

<b>I. LOCATION OF BUILDING</b>			
ADDRESS:			
CITY/VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND	
<b>II. IDENTIFICATION</b>			
<b>A. OWNER OR LESSEE</b>			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
<b>B. ARCHITECT OR ENGINEER</b>			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NUMBER		EXPIRATION DATE	
<b>C. CONTRACTOR</b>			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
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   2. <input type="checkbox"/> ADDITION   3. <input type="checkbox"/> ALTERATION   4. <input type="checkbox"/> REPAIR   5. <input type="checkbox"/> WRECKING   6. <input type="checkbox"/> MOBILE HOME SET-UP   7. <input type="checkbox"/> FOUNDATION ONLY 8. <input type="checkbox"/> PRE-MANUFACTURE   9. <input type="checkbox"/> RE-LOCATION			
<b>B. REVIEW(S) TO BE PERFORMED</b>			
<input type="checkbox"/> BUILDING <input type="checkbox"/> PLUMBING <input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> ENERGY			
<b>IV. PROPOSED USE OF BUILDING</b>			
<b>A. RESIDENTIAL - FOR "WRECKING", SHOW MOST RECENT USE</b>			
1. <input type="checkbox"/> ONE FAMILY                      2. <input type="checkbox"/> TWO OR MORE FAMILY (NO. OF UNITS _____)                      3. <input type="checkbox"/> HOTEL, MOTEL (NO OF UNITS _____) 4. <input type="checkbox"/> ATTACHED GARAGE                      5. <input type="checkbox"/> DETACHED GARAGE                      6. <input type="checkbox"/> OTHER			
<b>B. NON-RESIDENTIAL - FOR "WRECKING", SHOW MOST RECENT USE</b>			
7. <input type="checkbox"/> AMUSEMENT                      8. <input type="checkbox"/> CHURCH, RELIGION                      9. <input type="checkbox"/> INDUSTRIAL                      10. <input type="checkbox"/> PARKING GARAGE 11. <input type="checkbox"/> SERVICE STATION                      12. <input type="checkbox"/> HOSPITAL INSTITUTIONAL                      13. <input type="checkbox"/> OFFICE, BANK, PROFESSIONAL                      14. <input type="checkbox"/> PUBLIC UTILITY 15. <input type="checkbox"/> SCHOOL, LIBRARY, EDUCATIONAL                      16. <input type="checkbox"/> STORE, MERCANTILE                      17. <input type="checkbox"/> TANKS, TOWERS                      18. <input type="checkbox"/> 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.			
_____ _____ _____ _____			
<b>V. SELECTED CHARACTERISTICS OF BUILDING</b>			
<b>A. PRINCIPAL TYPE OF FRAME</b>			
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>B. PRINCIPAL TYPE OF HEATING FUEL</b>			
6. <input type="checkbox"/> GAS	7. <input type="checkbox"/> OIL	8. <input type="checkbox"/> ELECTRICITY	9. <input type="checkbox"/> COAL
10. <input type="checkbox"/> OTHER			
<b>C. TYPE OF SEWAGE DISPOSAL</b>			
11. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY		12. <input type="checkbox"/> SEPTIC SYSTEM	
<b>D. TYPE OF WATER SUPPLY</b>			
13. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY		14. <input type="checkbox"/> PRIVATE WELL OR CISTERN	
<b>E. TYPE OF MECHANICAL</b>			
15. WILL THERE BE AIR CONDITIONING? <input type="checkbox"/> Yes <input type="checkbox"/> No		16. WILL THERE BE AN ELEVATOR? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>F. DIMENSIONS</b>			
17. NUMBER OF STORIES _____		18. FLOOR AREA: 1 <sup>ST</sup> & 2 <sup>ND</sup> FLOOR _____	
		3 <sup>RD</sup> - 10 <sup>TH</sup> FLOOR _____	
TOTAL LAND AREA (SQUARE FEET)		11 <sup>TH</sup> - ABOVE FLOOR _____	
		TOTAL AREA _____	
<b>G. NUMBER OF OFF STREET PARKING SPACES</b>			
19. ENCLOSED _____		20. OUTDOORS _____	
VI APPLICANT INFORMATION			
<i>APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION</i>			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
FEDERAL ID NUMBER, SOCIAL SECURITY NUMBER			
<p>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 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.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>SECTION 23A OF THE STATE CONSTRUCTION CODE ACT OF 1972, ACT NO. 230 OF THE PUBLIC ACTS OF 1972, BEING SECTION 125.1523A OF THE MICHIGAN COMPILED LAWS, 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 SUBJECT TO CIVIL FINES.</p> </div>			
ESTIMATED COST OF CONSTRUCTION:			
FEE ENCLOSED \$		OR STATE ACCOUNT NUMBER	
SIGNATURE OF APPLICANT		DATE OF APPLICATION:	
<b>VII LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION</b>			
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		
<b>VIII. VALIDATION - FOR DEPARTMENT USE ONLY</b>			
NOTES AND DATA			

BUILDING PERMIT NUMBER

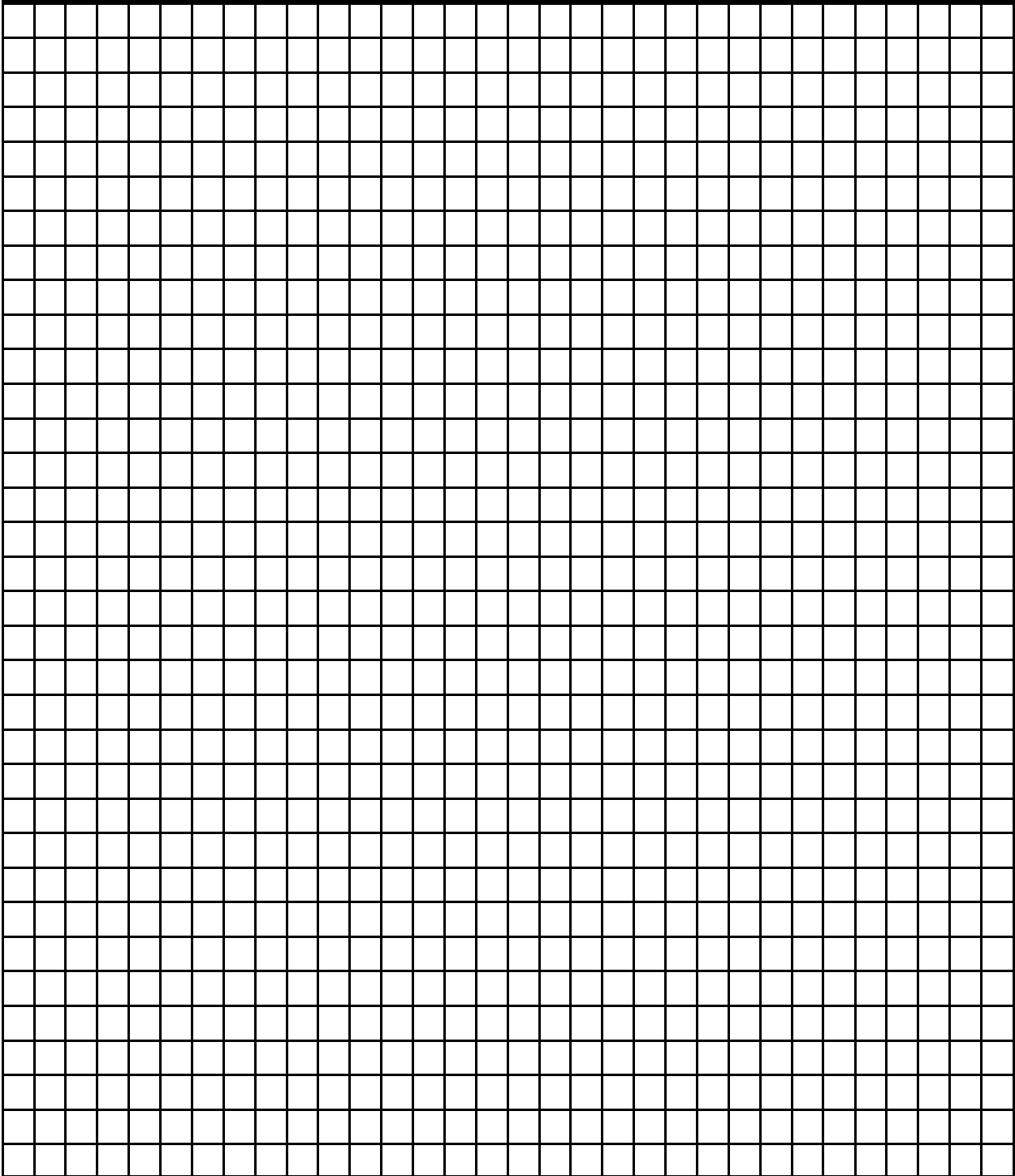
APPROVAL SIGNATURE

ISSUE DATE

PERMIT FEE

TITLE

IX. SITE OR PLOT PLAN - FOR APPLICANT USE



INDICATE DIRECTION OF NORTH WITHIN THE CIRCLE:

