



Sandstone Charter Township

Building Inspector

Bryan Powers

11680 Dove Lane

Rives Junction, MI 49277

517-937-8205

Powersb1820@gmail.com

Building Permit # _____

Papers and permits you will need to bring with you when obtaining a building permit.

Disregard numbers 1, 2, & 3 if you are building a garage, pole barn, or building an addition to you home.

Include 1, 2, & 3 if it is a recently split or undeveloped property.

1. Record deed (proof of recorded ownership)
2. Health Department permit (well & septic) Jackson County Health Department
3. Driveway Permit- Jackson County Road Commission
4. Complete set of plans (including foundation plans)
5. This application filled out.
6. If a contractor, your license number.
7. Please fill out last page of application with site plan. Site Plan must show all existing easement on Property and type of easements.
8. Soil erosion and sedimentation control permit.
NOTE: Poles for construction must be .60 treated.
9. Any utility easements (must be shown on site plan).

Name of Owner

Contractor

Location of Building

License #

Cc: Township Office Title, Property Owner, Zoning/Building Inspector

Zoning Administrator/Building Inspector

Bryan Powers

Special Notes

SANDSTONE CHARTER TOWNSHIP
Building Inspector/Zoning Administrator
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APPLICATION FOR BUILDING/ACCESSORY PERMIT AND PLAN EXAMINATION

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.
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Applicant to complete all items in Section 1, II, III, IV, V, and VI

NOTE: Separate application must be made to the appropriate divisions for plumbing, mechanical and electrical work permits.

Address:	
City/Village:	Township:
County:	Zip Code:
Between:	And:
Owner or Lessee Name:	
Email Address:	Telephone No.:
Address:	City:
State:	Zip Code:
Architect or Engineer:	
Name:	Telephone No.:
Address:	City:
State:	Zip Code:
License Number:	Expiration Date:
Contractor:	
Name:	Telephone No.:
Address:	City:
State:	Zip Code:
Builders License No.:	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:	
Type of Improvement:	Code Compliance Permit:
<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Wrecking <input type="checkbox"/> Mobile Home Set-up <input type="checkbox"/> Foundation Only <input type="checkbox"/> Premanufacture <input type="checkbox"/> Relocation <input type="checkbox"/> New House/Garage <input type="checkbox"/> HUD <input type="checkbox"/> Double Wide <input type="checkbox"/> Pole Barn <input type="checkbox"/> Garage <input type="checkbox"/> BOCA Certified <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Roof Repair <input type="checkbox"/> Replacement Window <input type="checkbox"/> Re-roofing <input type="checkbox"/> In-Ground Pool	
Review(s) to be Performed: <input type="checkbox"/> Building <input type="checkbox"/> Plumbing <input type="checkbox"/> Electrical <input type="checkbox"/> Energy	
TOTAL COSTS OF IMPROVEMENT(S):	
RESIDENTIAL FOR "WRECKING". SHOW MOST RECENT USE:	
<input type="checkbox"/> One Family <input type="checkbox"/> Hotel, Motel No. of Units _____ <input type="checkbox"/> Detached Garage <input type="checkbox"/> Two or more Family No. Of Units: _____ <input type="checkbox"/> Attached Garage <input type="checkbox"/> Other: _____	

Non-Residential for "Wrecking, Show Most Recent Use:	
<input type="checkbox"/> Amusement <input type="checkbox"/> Church, Religion <input type="checkbox"/> Industrial <input type="checkbox"/> Parking Garage <input type="checkbox"/> Service Station <input type="checkbox"/> Hospital, Institutional <input type="checkbox"/> Office, bank, Professional <input type="checkbox"/> Public Utility <input type="checkbox"/> School, Library, Educational <input type="checkbox"/> Store, Mercantile <input type="checkbox"/> Tank, Towers <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(s), rental, office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.:	
Cost of Construction (Commercial Projects only):	
PRINCIPLE TYPE OF FRAME:	
<input type="checkbox"/> Masonry, Wall <input type="checkbox"/> Wood Frame <input type="checkbox"/> Structural Steel <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Other (Exp W) Attach Sheet <input type="checkbox"/> Bearing	
PRINCIPLE TYPE OF HEATING FUEL: <input type="checkbox"/> gas <input type="checkbox"/> Oil <input type="checkbox"/> Electricity <input type="checkbox"/> Coal <input type="checkbox"/> Other: Explain W/Attach sheet:	
TYPE OF SEWAGE DISPOSAL: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Septic System	
TYPE OF WATER SUPPLY: <input type="checkbox"/> Public or Private <input type="checkbox"/> Private well or cistern	
TYPE OF MECHANICAL: Will there be air conditioning? <input type="checkbox"/> Yes <input type="checkbox"/> No Will there be an elevator? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DIMENSIONS:	
Number of Stories: _____	Floor Area 1 st & 2 nd Floor: _____
	Living area basement: _____
	3 rd -10 th Floor: _____
	11 th above floor: _____
Total Land Area (Square Feet): _____	Total Area: _____
NUMBER OF OFF-STREET PARKING SPACES: <input type="checkbox"/> Enclosed <input type="checkbox"/> Outdoors	
Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information.	
Name: _____	Telephone: _____
Address: _____	Email: _____
City: _____	State: _____
Zip Code: _____	Federal ID Number/Social Security No: _____
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. 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. Act No. 230 of the Public Actos of q972 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.	
Fee Enclosed: \$	Or State Account Number:
Signature of Applicant:	Date:
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. Soll 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

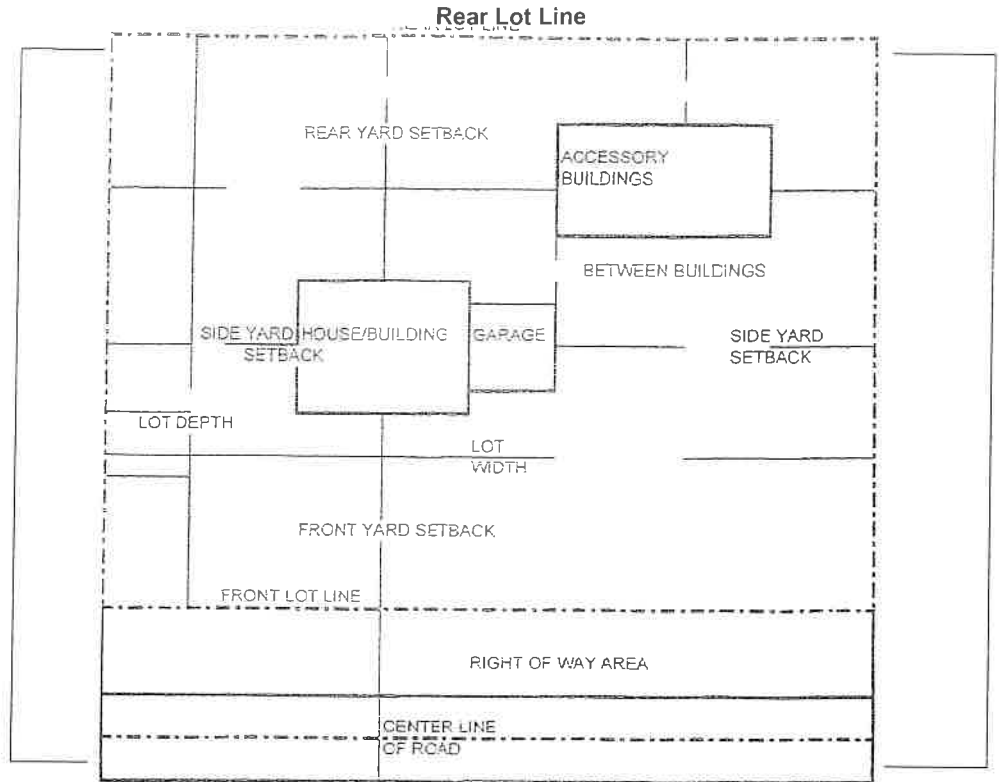
H. Septic System	<input type="checkbox"/> Yes <input type="checkbox"/> No
I. Variance Granted	<input type="checkbox"/> Yes <input type="checkbox"/> No
J. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
VALIDATION – FOR DEPARTMENT USE ONLY	
Notes and Data:	
Building Permit No.:	
Issue Date:	Permit Date:

Approval Signature: _____ **Title:** _____

Note: Please get separate permit applications from Sandstone Township office for Residential and Field Driveway Permit and Address Application for Residential and Commercial Permit if needed for this project.

ILLUSTRATIONS OF ZONING TERMS GENERAL LOT TERMS
 Fill in All Measurements Between Property Lines and Buildings
 Write the Numbers in the Openings in the Lines

Applicant to draw in site plan



1. On the corner lots, the minimum front yard setback shall be met on both frontages.
2. See specific multiple family regulations in Section 5.18.
3. See specific mobile home park regulations in Section 5.15.

Rear Lot Line

Front Lot Line

Street Right of Way

Final Drawing

Signature _____

Date _____

8-1-02

Section 4.9 Schedule of Regulations Sandstone Charter Township, Jackson County

Zoning District	Minimum Lot Size		Maximum Building Height		Minimum Yard Setback			Lot Area Coverage	Footnotes
	Area (Acres)	Lot Width (Feet)	Stories	Height (Feet)	Front Yard (Feet)	Side Yard (Feet)	Rear Yard (Feet)		
Agricultural, AG-1 Single Family Detached Dwellings All Other Uses	2.5	200	2.5	35	60	30	50	20%	1, 4, 5
	10.0	330	2.5	35	60	30	50	20%	
Rural Non-Farm Residential, RNF-1 Single Family Detached Dwelling All Other Uses	1.5	150	2.5	35	35	20	35	20%	1, 4, 5
	2.5	200	2.5	35	35	20	35	20%	
Suburban Residential, RS-1	1.0	100	2.5	35	35	15	25	20%	1, 4, 5
Multiple Family, RM-1	5.0	200	2.5	35	50	50	50	25%	1, 2, 4, 5
Mobile Home Park, MHP	15.0	330	2.5	35	50	50	50	25%	1, 3, 4, 5
Local Commercial, C-1	0.5	100	2.5	35	35	15	25	25%	1, 4, 5
General Commercial, C-2	1.0	150	2.5	30	50	20	20	25%	1, 4, 5
Limited Industrial, LI	1.0	150	2.5	30	50	20	20	40%	1, 4, 5

1. On all corner lots, the minimum front yard setback shall be met on both road frontages.
2. Single-family detached dwellings are subject to all RS-1 regulations. See specific multiple family regulations in Section 5.16.
3. See specific mobile home park regulations in Section 5.15.
4. See Section 5.5 for setbacks pertaining to accessory buildings.
5. All permitted and conditional uses shall meet the minimum lot size, building height and yard setback unless otherwise specified elsewhere in this Ordinance.