

APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

CHECK FOR ANY DEED RESTRICTIONS

SANDSTONE CHARTER TOWNSHIP

APPLICABLE TO THIS PROPERTY	Bryan Powers	Use Group	
AND/OR CONSTRUCTION.	11680 Dove Lane	Category	
powersb1820@outlook.com	Rives Junction, MI 49277	Cons Type	
	(517) 937-8205		

AUTHORITY: P.A. 230 of 1972, AS AMENDED	THE DEPARTMENT OF CONSUMER AND INDUSTRY SERVICES WILL NOT
COMPLETION: MANDATORY TO OBTAIN PERMIT	DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE,
PENALTY: PERMIT WILL NOT BE ISSUED	SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS,
	HANDICAP, OR POLITICAL BELIEFS.

APPLICANT TO COMPLETE ALL SHADED ITEMS

PARCEL NUMBER 000-07-

I. PROJECT INFORMATION

PROPERTY OWNER	ADDRESS		
CITY	TOWNSHIP	SANDSTONE	COUNTY JACKSON
			ZIP CODE 49269

II IDENTIFICATION

A. OWNER OR LESSEE

NAME	ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE

B. ARCHITECT / ENGINEER OR OWNER OF PROPERTY

NAME	ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE

C. CONTRACTOR

NAME	ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE
BUILDERS LICENSE NUMBER	EXPERATION DATE		

EMAIL ADDRESS

III. TYPE OF IMPROVEMENT AND PLAN REVIEW

A. TYPE OF IMPROVEMENT

- NEW BUILDING
 ADDITION
 ALTERATION
 REPAIR
 WRECKING
 MOBILE HOME SET-UP
 FOUNDATION ONLY
 PREMANU FACT
 RELOCATION

B. REVIEW(S) TO BE PERFORMED

- BUILDING
 PLUMBING
 MECHANICAL
 ELECTRICAL
 ENERGY

IV. PROPOSED USE OF BUILDING

A. RESIDENTIAL - For "Demolition", show most recent use

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

B. NON-RESIDENTIAL

<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"/> TANKS, TOWERS	<input type="checkbox"/>	OTHER

GIVE DESCRIPTION OF WORK BEING DONE RESIDENTIAL OR NONRESIDENTIAL

ESTIMATED CONSTRUCTION COST: FOR COMMERCIAL AND/OR RESIDENTIAL PROJECTS

\$

V. SELECTED CHARACTERISTICS OF BUILDING

A. PRINCIPAL TYPE OF FRAME

MASONRY, WALL WOOD FRAME STRUCTURAL STEEL REINFORCED CONCRETE OTHER

B. PRINCIPAL TYPE OF HEATING FUEL

GAS OIL ELECTRICITY COAL OTHER

C. TYPE OF SEWAGE DISPOSAL

PUBLIC OR PRIVATE COMPANY SEPTIC SYSTEM

D. TYPE OF WATER SUPPLY

PUBLIC OR PRIVATE COMPANY PRIVATE WELL OR CISTERN

E. TYPE OF MECHANICAL

WILL THERE BE AIR CONDITIONING? YES NO

F. DIMENSIONS/DATA

NUMBER OF STORIES _____	FLOOR AREA:	TOTAL LAND AREA _____
		(SQUARE FEET)
	1ST & 2ND FLOOR _____	
	3RD - 10TH FLOOR _____	
	TOTAL AREA _____	

G. NUMBER OF OFF STREET PARKING SPACES

ENCLOSED _____ OUTDOORS _____

VI. APPLICANT INFORMATION

WARNING NOTICE

NO OCCUPANCY PERMITS WILL BE ISSUED OR PERSONS ALLOWED TO MOVE ON THE PREMISES UNTIL FINAL APPROVAL HAS BEEN RECEIVED FOR ALL BUILDING, MECHANICAL, PLUMBING, AND/OR ELECTRICAL WORK PERFORMED ON THE PREMISES, IN ADDITION TO ZONING AND DEPT. OF PUBLIC WORKS APPROVAL.

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.

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, 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.

FEE ENCLOSED \$ _____ OR STATE ACCOUNT NO. _____

Signature of Applicant

Application Date

VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS

	REQUIRED?	APPROVED	DATE	NUMBER	BY
A- ZONING/DISTRICT	YES NO				
1. SITE PLAN APPROVAL	YES NO				
2. VARIANCE GRANTED	YES NO				
B- FIRE	YES NO				
C- POLLUTION CONTROL	YES NO				
D- FLOOD ZONE	YES NO				
E- SOIL EROSION/COUNTY D	YES NO				
F- TWP. WATER/SEWER	YES NO				
G- WATER/COUNTY HEALTH	YES NO				
H- SEPTIC/COUNTY HEALTH	YES NO				
I- COUNTY ROAD COMM.	YES NO				
J- ASSESSING DEPT.	YES NO				

COMPUTER PROPERTY TAX # _____

ALL PERSONAL AND PROPERTY _____ YES _____ NO _____

VIII. VALIDATION

BUILDING PERMIT NUMBER	APPROVED BY	
ISSUE DATE	SIGNATURE	

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

