

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
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 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

LICENSE NUMBER

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
NO. OF UNITS _____ | <input type="checkbox"/> HOTEL, MOTEL
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 checked="" 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 PREMISIS, 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

