BUILDING DEPARTMENT

APPLICATION FOR BUILDING AND CERTIFICATE FOR OCCUPANCY

TOWNSHIP OF _____ PROPERTY CODE _____

Building Address

Owner
Name
Address
City **Tel. No.**

Architect Engineer
Name
Address
City **Tel. No.**

Contractor
Name
Address
City **Tel. No.**

Class of Work

Tower		Re-Shingle		Pool	
Fence		Re-Set		Pole Bldg.	
Pond		Tanks		Other	

Use of Bldg.

Size of Bldg. Ht.

No. of Fls.	Families
No. of Rms.	Lot Size

No. and Use of Bldg. now on lot

DIMENSIONS/DATA

NUMBER OF STORIES _____

USE GROUP _____

CONST. TYPE _____

NO. OF OCCUPANTS _____

Bldg Permit No. Date Issued

A

VALUATION	
	Bldg. Fee
	Plan Ck. Fee
	Total

MOBILE HOME OR TRAILER

MANUFACTURER _____

SERIAL NO. _____

DATE OF MANUFACTURE _____

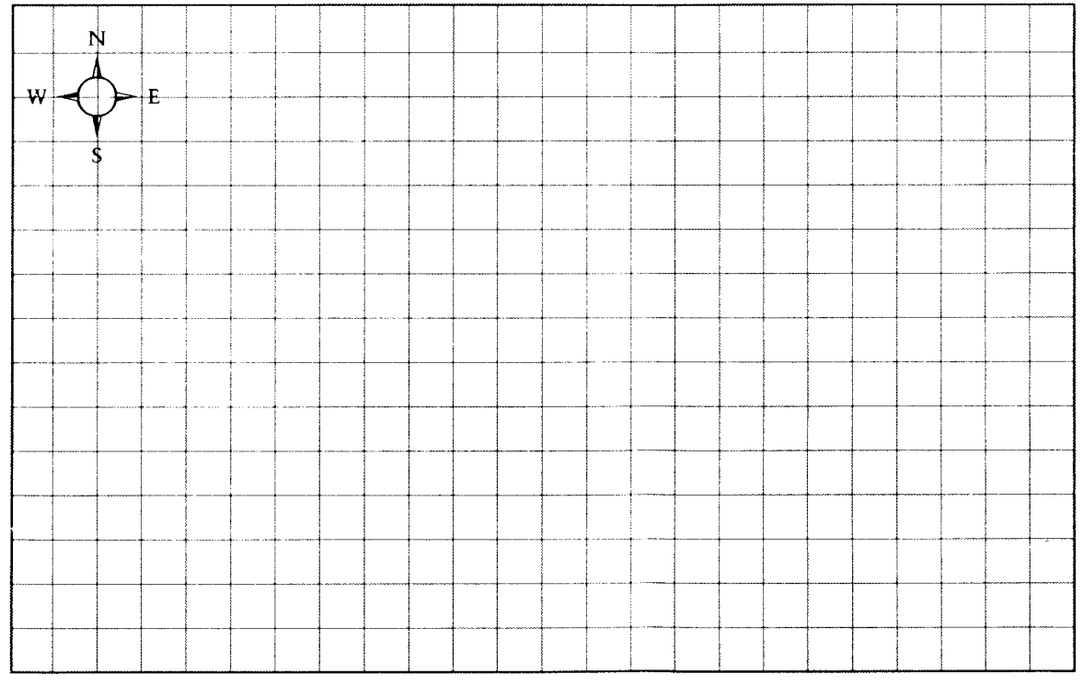
A. PRINCIPLE TYPE OF FRAME
1. ☐ MASONRY, WALL BEARING 2. ☐ WOOD FRAME
3. ☐ STRUCTURAL STEEL 4. ☐ REINFORCED CONCRETE
5. ☐ OTHER

B. PRINCIPAL TYPE OF HEATING FUEL
6. ☐ GAS 7. ☐ OIL
8. ☐ ELECTRICITY 9. ☐ COAL
10. ☐ OTHER

C. TYPE OF SEWAGE DISPOSAL
11. ☐ PUBLIC OR PRIVATE COMPANY
12. ☐ SEPTIC SYSTEM

D. TYPE OF WATER SUPPLY
13. ☐ PUBLIC OR PRIVATE COMPANY
14. ☐ PRIVATE WELL OR CISTERN

PILOT PLAN



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

REVIEW(S) TO BE PERFORMED

☐ BUILDING ☐ ELECTRICAL ☐ MECHANICAL ☐ PLUMBING ☐ FOUNDATION

BUILDERS LICENSE NO.	EXPIRATION DATE
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION	
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION	WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION

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 residential structure. Violators of section 23a are subjected to civil fines.

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all Township ordinances and State Laws regulating building construction.

Owner/Builder Social Security No._____

Applicant Signature_____ **Application Date**_____

☐ RESIDENTIAL
☐ COMMERCIAL
☐ INDUSTRIAL

PLANNING DIRECTOR _____ DATE _____

BUILDING INSPECTOR _____ DATE _____

Inspector-White **Applicant-Yellow** **Township-Pink**