APPLICATION FOR BUILDING PERMIT

AND EXAMINATION

RETURN COMPLETED FORM TO: BUILDING DEPARTMENT

111 GRAND STREET ALLEGAN, MI 49010

Phone 269-673-3239 or 1-800-626-5964 Fax: 269-673-9583

APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V, AND VI. NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING, MECHANICAL, AND ELECTRICAL WORK PERMITS.

I. PROJECT INFORMATION									
PROJECT NAME		ADDRESS	ADDRESS						
CITY	VILLAGE	TOWNSHIP	TOWNSHIP COUNTY			ZIP CODE			
BETWEEN	1	AN D				I			
EXTIMATED PROJECT COST		PROF	PERTY TAX ID NUMB	ER					
ESTIMATED PROJECT COST		and the same of th		~					
II. IDENTIFICATION	Cong.	- Feet	The second second						
A. OWNER OR LESSEE		15		The state of the s					
NAME		ADDRESS	part of the same						
CITY	AAiz	STATE	ZIP CODE	IIA '	TELEPHONE NUME	BER			
B. ARCHITECT OR ENGINE	B. ARCHITECT OR ENGINEER								
NAME		ADDRESS							
CITY	T	STATE	ZIP CODE		TELEPHONE NUME	BER			
LICENCE NUMBER		MIN	E E		EXPIRATION DATE	EXPIRATION DATE			
C. CONTRACTOR		V			7				
NAME		ADDRESS	1		Pal				
CITY	C	STATE	ZIP CODE		TELEPHONE NUME	BER			
BUILDERS LICENSE NUMBER	36		LE	2	EXPIRATION DATE				
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION									
WORKERS COMP INSURANCE CARR	EIER OR REASON FOR EXEMPTION								
MESC EMPLOYER NUMBER OR REAS	SON FOR EXEMPTION								
III. TYPE OF IMPROVEMEN	T AND PLAN REVIEW								
A. TYPE OF IMPROVEMEN	Т								
1. NEW BUILDING	3. ALERATION 5	5. DEMOLITION		7. FOUNDATION ONLY		9. RELOCATION			
2. ADDITION				B. PREMANUFACTURE 10		D. SPECIAL INSPECTION			
B DEVIEW(S) TO BE DEDE	ODMED								
B. REVIEW(S) TO BE PERF	OKINED								
BUILDING	☐ ELECTRICAL	☐ MECHANICAL		☐ PLUMBING		FOUNDATION			

IV. PROPOSED USE OF BUILDING	l						
A. RESIDENTIAL							
1. ONE FAMILY		3. HOTEL, MOTEL NO. OF UNITS	5. ☐ DETACHED GARAGI	5. DETACHED GARAGE			
2. TWO OR MORE FAMILY NO. OF UNITS	_	4. ATTACHED GARAGE	6. 🗆 OTHER	6. ☐ OTHER			
B. NON-RESIDENTIAL							
7. AMUSEMENT		11. SERVICE STATION	15. SCHOOL LIBRARY,	15. SCHOOL LIBRARY, EDUCATIONAL			
8. CHURCH, RELIGION		12. HOSPITAL, INSTITUTIONAL	16. ☐ STORE, MERCHAN	16. STORE, MERCHANTILE			
9. INDUSTRIAL		13. OFFICE, BANK, PROFESSIONAL	17. 🗌 TANKS, TOWERS	17. TANKS, TOWERS			
10. PARKING GARAGE		14. PUBLIC UTILITY	18. 🗌 OTHER	18. ☐ OTHER			
ELEMENTARY SCHOOL, SECONI	DARY SCHOOL, COL	LĹEGE, PAROCHIAL SCHOOL, PAR	T, MACHINE SHOP, LAUNDRY BUILI KKING GARAGE FOR DEPARTMENT JILDING IS BEING CHANGED, ENTE	STORE, RENTAL			
		50					
	V		7				
V. SELECTED CHARACTERISTICS	OF BUILDING	hidan					
A. PRINCIPAL TYPE OF FRAME	AIIC	ПОИ	50				
1. MASONRY, WALL BEARING	2. WOOD FRAME	3. STRUCTURAL STEEL	4. REINFORCED CONCRETE	5. OTHER			
B. PRINCIPLE TYPE OF HEATING	FUEL						
6. GAS	7. 🗌 OIL	8. TELECTRICITY	9. 🗌 COAL	10. OTHER			
C. TYPE OF SEWAGE DISPOSAL			J				
11. PUBLIC OR PRIVATE COMPANY	0	. <u> </u>	12.☐ SEPTIC SYSTEM				
D. TYPE OF WATER SUPPLY	26 L	vices	/				
13. PUBLIC OR PRIVATE COMPANY	•••		14.☐ PRIVATE WELL OR CISTERN				
E. TYPE OF MECHANICAL							
15. WILL THERE BE AIR CONDITIONING?	☐ YES ☐ NO		16. WILL THERE BE FIRE SUPRESSION?	☐YES ☐ NO			
F. DIMENSIONS / DATA	WIDTH	LENGTH	l HE	IGHT			
17. NUMBER OF STORIES		21. FLOOR AREA:	EXISTING ALTERATIONS	NEW			
18. USE GROUP		BASEMENT:					
19. CONST. TYPE		1ST & 2ND FLOOR					
20. NO. OF OCCUPANTS		3RD – 10TH FLOOR	·				
		11TH – ABOVE					
		TOTAL AREA					
G. NUMBER OF OFF STREET PAR	KING SPACES						
	TANG OF AGES						
22. ENCLOSED		23 OUTDO	ORS				

VI. APPLICANT INFORMATION						
APPLICANT IS RESPONSIBLE FOR THE FOLLOWING INFORMATION. NAME	PAYMENT OF ALL FEES	AND CHARGES APPLIC	ABLE TO	THIS APP	LICATION AND MUS	T PROVIDE THE
ADDRESS						
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER						
I HEREBY CERTIFY THAT THE PROPOS OWNER TO MAKE THIS APPLICATION A STATE OF MICHIGAN. ALL INFORMATION	S HIS/HER AUTHORIZED	AGENT, AND WE AGRE	E TO CON	NFORM TO	ALL APPLICABLE L	AWS OF THE
Section 23a of the state constructivent the licensing requirements of terror structure. Violators of section 23a a	his state relating to perso	ons who are to perform				
SIGNATURE OF APPLICANT		7	Tito.			
SIGNATURE OF AFFLICANT			The same of the sa	3		
PLAN REVIEW FEE ENCLOSED \$	AIGL			1		
BUILDING PERMIT FEE ENCLOSED \$						
VII. BUILDING DEPARTMENT USE ONLY	1					
	ENVIRONMEN	TAL CONTROL APPROV	VALS	/ \		
	REQUIRED?	APPROVED	DA	TE	NUMBER	BY
A – ZONING	☐ YES ☐ NO		J			
B – FIRE DISTRICT	☐ YES ☐ NO					
C – POLLUTION CONTROL	YES NO	ida		1		
D - NOISE CONTROL	☐ YES ☐ NO	MCC				
E - SOIL EROSION	☐ YES ☐ NO	financia de la companya del companya de la companya del companya de la companya d		gerl		
F – FLOOD ZONE	☐ YES ☐ NO					
G – WATER SUPPLY	☐ YES ☐ NO					
H - SEPTIC SYSTEM	☐ YES ☐ NO					
I – VARIANCE GRANTED	☐ YES ☐ NO					
J - OTHER	☐ YES ☐ NO					
VII. VALIDATION – FOR DEPARTMENT U	JSE ONLY					
USE GROUP		BASE FEE				
TYPE OF CONSTRUCTION		_ NU MBER OF IN	ISPECTIONS			
SQUARE FEET		_				
APPROVAL SIGNATURE						
TITLE				DATE		

BUILDING APPLICATION / ZONING

Site Plan: (Please read carefully and complete). Use the space below, or on a separate sheet of paper, to draw a diagram showing all of the following items.

- 1. The dimension of the lot or acreage. (all sides)
- 2. The location, distances to lot lines, of all existing and proposed structures.
- 3. The dimensions of all existing and proposed structures.
- 4. The distances between all existing structures.
- 5. The location of all roads bordering or on the property.
- 6. The location of any power and gas lines on property.
- 7. The location of any lakes, rivers, streams, or wetlands on or near property.
- 8. The location of any easements on the property.
- 9. A north arrow indicating the direction of north.

Michigan Township Services

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Front	ft.	Re	ear	ft.	Side RT.	Left	
Lot width		ft.	Lot area	_	sq. ft.	Living Area	
Dist. betwee	n bldg	S		ft.	Zoning D	ist.	
Approved					Denied _		
Signature _						Date	
Passon Dar	hair						