



APPLICATION FOR BUILDING PERMIT

AND PLAN 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, AND VI.
NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING,
MECHANICAL, AND ELECTRICAL WORK PERMITS

I PROJECT INFORMATION				
PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND		
ESTIMATED PROJECT COST		PROPERTY TAX ID NUMBER		
II. IDENTIFICATION				
A. OWNER OR LESSEE				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
B. ARCHITECT OR ENGINEER				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
LICENSE NUMBER			EXPIRATION DATE	
C. CONTRACTOR				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
BUILDERS LICENSE NUMBER			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				
III. TYPE OF IMPROVEMENT AND PLAN REVIEW				
A. TYPE OF IMPROVEMENT				
1. <input type="checkbox"/> NEW BUILDING	3. <input type="checkbox"/> ALTERATION	5. <input type="checkbox"/> DEMOLITION	7. <input type="checkbox"/> FOUNDATION ONLY	9. <input type="checkbox"/> RELOCATION
2. <input type="checkbox"/> ADDITION	4. <input type="checkbox"/> REPAIR	6. <input type="checkbox"/> MOBILE HOME SET-UP	8. <input type="checkbox"/> PREMANUFACTURE	10. <input type="checkbox"/> SPECIAL INSPECTION
B. REVIEW(S) TO BE PERFORMED				
<input type="checkbox"/> BUILDING	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> FOUNDATION

IV. PROPOSED USE OF BUILDING

A. RESIDENTIAL

1. ONE FAMILY

2. TWO OR MORE FAMILY
NO. OF UNITS _____

3. HOTEL, MOTEL
NO. OF UNITS _____

4. TWO OR MORE FAMILY

5. DETACHED GARAGE

6. OTHER

B. NON-RESIDENTIAL

7. AMUSEMENT

8. CHURCH, RELIGION

9. INDUSTRIAL

10. PARKING GARAGE

11. SERVICE STATION

12. HOSPITAL, INSTITUTIONAL

13. OFFICE, BANK, PROFESSIONAL

14. PUBLIC UTILITY

15. SCHOOL, LIBRARY, EDUCATIONAL

16. STORE, MERCANTILE

17. TANKS, TOWERS

18. OTHER

DESCRIBE IN DETAIL PROPOSED PROJECT AND USE:

V. SELECTED CHARACTERISTICS OF BUILDING

A. PRINCIPAL 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

12. PRIVATE WELL OR CISTERN

E. TYPE OF MECHANICAL

15. WILL THERE BE AIR CONDITIONING? YES NO

16. WILL THERE BE FIRE SUPPRESSION? YES NO

F. DIMENSIONS / DATA

17. NUMBER OF STORIES	WIDTH	21. FLOOR AREA:	LENGTH		
			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 PARKING SPACES

22. ENCLOSED _____

23. OUTDOORS _____

VI. APPLICANT INFORMATION

NAME _____ TELEPHONE NO. _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER _____

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

SIGNATURE OF APPLICANT

PLAN REVIEW FEE ENCLOSED \$ _____

BUILDING PERMIT FEE ENCLOSED \$ _____

VII. BUILDING DEPARTMENT USE ONLY

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 - SOIL 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				

VII. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP _____ BASE FEE _____

TYPE OF CONSTRUCTION _____ NUMBER OF INSPECTIONS _____

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 dimensions 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 wetland on or near property.
8. The location of any easements on the property.
9. A north arrow indicating the direction of north.

*****Do not write below this line*****

Required setbacks

Front _____ ft. Rear _____ ft. Side RT. _____ Left _____

Lot width _____ ft. Lot area _____ Sq. ft. Living Area _____

Dist. Between bldgs. _____ ft. Zoning Dist. _____

Approved _____ Denied _____

Signature _____ Date _____

Reason Denied _____