BUILDING PERMIT INFORMATION SOUTH HAVEN TOWNSHIP

THE FOLLOWING INFORMATION IS NEEDED TO OBTAIN A BUILDING PERMIT:

- 1. A complete building permit <u>application</u> form showing:
 - a. A detailed site diagram
 - b. Owner/contractor/jobsite information
 - c. Agent Authorization (if builder obtains permit)
- 2. A complete zoning compliance permit application
- 3. Three sets of plans to scale (one will be returned to be kept on the jobsite) Include in the plans:
 - A: Foundation Plan detailed
 - B: All significant elevations (side views)
 - C: Floor plans including, but not limited to: use of all rooms and dimensions; window and door sizes; stairway structural details (if applicable); deck structural details (if applicable)
 - D: Cross section of one wall from footing to peak
 - E: Identify north elevation as (N)
 - F: Indicate snow-loading capacity. Be sure to show all dimensions
 - G: Energy code insulation values
 - H: Items required prior to rough-in: 1) Manufacturers truss diagrams 2) Mechanical Design Criteria (Manual S & J)
- 4. <u>Environmental health permit</u> is necessary for a septic & well system or an approval from the local municipal water/sewer authority VanBuren Co. Health Dept 269-621-3143
- 5. <u>Proof of ownership</u> A copy of your deed or land contract or a tax bill receipt
- 6. Soil Erosion & Sedimentation Control Permit a permit may be required if your jobsite is within 500' of a lake, river, stream, creek or county drain or if your project disturbs one acre or more 269-657-8241
- 7. <u>Driveway Permit</u> the Van Buren County Road Commission requires a permit or waiver for construction 269-674-8011 or MDOT

GENERAL INFORMATION

The building inspector is available at the Township Hall on Tuesday 10:00am-12:00pm. Hall phone 269-637-3305 and at Michigan Township Services M-F 8-9am Office: 111 Grand Street, Allegan MI 49010 Phone 1-800-626-5964 Fax 269-673-9583. Email - mtsallegan@frontier.com

Township Hall - 09761 Blue Star Hwy

The zoning administrator is available at the Township Hall on Tuesdays 9-12pm and Thursday 1:30-4pm. Hall phone 269-637-3305 email shtwp.zoninga@gmail.com and available at Michigan Township Services MWThF 8-12; 1-5 1-800-626-5964 mtsallegan@frontier.com

Electrical, Mechanical and Plumbing permits must be obtained separately; they are not included with the building permit

- -Electrical and Mechanical contact Michigan Township Services at 1-800-626-5964 applications available www.michigantownshipservices.org
- -Plumbing permits contact State of Michigan at 517-241-9313



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				76 316 MARINE
CITY VILLAGE	TOWNSHIF)	COUNTY		ZIP CODE
BETWEEN		AND	1		
ESTIMATED PROJECT COST		PROPERTY TAX ID NUM	BER		
II. IDENTIFICATION					
A. OWNER OR LESSEE					Water the second
NAME	ADDRESS	*************************************			
CITY	STATE	STATE ZIP CODE		TELEPHONE NUMBER	
B. ARCHITECT OR ENGINEER	<u> </u>			.1	
NAME	ADDRESS				
CITY	STATE	ZIP CODE		TELEPHONE NU	MBER
LICENSE NUMBER				EXPIRATION DA	TE
C. CONTRACTOR			NE PERSONAL A	J	
NAME	ADDRESS				
CITY	STATE	ZIP CODE		TELEPHONE NU	MBER
BUILDERS LICENSE NUMBER				EXPIRATION DA	TE
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION	DN				
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXE	MPTION			<u> </u>	
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION					
III. TYPE OF IMPROVEMENT AND PLAN REVIE	W				
A. TYPE OF IMPROVEMENT					
	5. DEMOLITION 6. MOBILE HOME SI		OUNDATION ONLY REMANUFACTURE		ELOCATION PECIAL INSPECTION
B. REVIEW(S) TO BE PERFORMED					
□ BUILDING □ ELECTRICAL	☐ MECHANICAL	□ F	PLUMBING	. 🗆	FOUNDATION

A. RESIDENTIAL	IV. PROPOSED USE OF BUILDIN	G					
NO. OF UNITS	A. RESIDENTIAL						
B. NON-RESIDENTIAL 7. ANUSEMENT 11. SERVICE STATION 14. STATION 15. STATION 16. STORE, MERCANTILE 16.	1. ONE FAMILY		3. 🗆		5.	DETACHED GARAGE	
AMUSEMENT 11. SERVICE STATION 15. SCHOOL_LIBRARY, EDUCATIONAL			4. 🗆	TWO OR MORE FAMILY	6.	OTHER	
8. GHURCH RELIGION 12 HOSPITAL, INSTITUTIONAL 11 GO STORE, MERCANTILE 11 OFFICE, BANK, PROFESSIONAL 11 TAINS, TOWERS 14 PUBLIC UTILITY 18 OFFICE AND USE: V. SELECTED CHARACTERISTICS OF BUILDING A. PRINCIPAL TYPE OF FRAME 1. MASONER, WALL BEARING 2 WOOD FRAME 3. STRUCTURAL STEEL 4. REINFORCED CONCRETE 5. OTHER PRINCIPAL TYPE OF FRAMING FUEL 2 GAS 7. OL 8. ELECTRICITY 8. COAL 10. OTHER D. TYPE OF SEWAGE DISPOSAL 11. PUBLIC OR PRINTE COMPANY 12. SEPTIC SYSTEM D. TYPE OF MATER SUPPLY 13. PUBLIC OR PRINTE COMPANY 12. PRINATE WELL OR CISTERN 14. WILL THERE BE AIR CONDITIONING? YES NO 15. WILL THERE BE AIR CONDITIONING? YES NO 16. WILL THERE BE FIRE SUPPRESSION? YES NO 16. WILL THERE BE FIRE SUPPRESSION? NEW 18. USE GROUP 19. CONST. TYPE 19. CONST. TYPE 19. CONST. TYPE 19. SASSMENT 19. SAS	B. NON-RESIDENTIAL			***************************************			
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G. NUMBER OF OFF STREET PARKING SPACES				11TH - ABOVE			
				TOTAL AREA			
22. ENCLOSED 23. OUTDOORS	G. NUMBER OF OFF STREET PAF	KING SPACES					
	22. ENCLOSED			23. OUTDOORS		and the state of t	

VI. APPLICANT INFORMATION					
NAME			TELEI	PHONE NO.	
ADDRESS		CITY	STATE	ZIP CODE	
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER					
I HEREBY CERTIFY THAT THE PROPOSED WO OWNER TO MAKE THIS APPLICATION AS HIS STATE OF MICHIGAN. ALL INFORMATION SUB	HER AUTHORIZED AG	ENT, AND WE AGRE	E TO CONFORM T	O ALL APPLICABLE	LAWS OF THE
Section 23a of the state construction co- circumvent the licensing requirements o residential structure. ViolatOrs of section	f this state relating to	persons who are			
SIGNATURE OF APPLICANT					
PLAN REVIEW FEE ENCLOSED \$					
BUILDING PERMIT FEE ENCLOSED \$			·		
VII. BUILDING DEPARTMENT USE ONLY					
	ENVIRONMENTAL C	ONTROL APPROVA	als .		
	REQUIRED?	APPROVED	DATE	NUMBER	ВҮ
A - ZONING	☐ YES ☐ NO				
B - FIRE DISTRICT	☐ YES ☐ NO			· · · · · · · · · · · · · · · · · · ·	
C - POLLUTION CONTROL	☐ YES ☐ NO				
D - NOISE CONTROL	☐ YES ☐ NO				
E - SOIL EROSION	☐ YES ☐ NO				
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 USE O	DNLY				
USE GROUP		BASE FEE			
TYPE OF CONSTRUCTION		NUMBER OF I	NSPECTIONS		
SQUARE FEET				and the angular of the case of	
APPROVAL SIGNATURE					
TITLE		DATE			
		L			

BUILDING APPLICATION / ZONING

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

				setbacks	e*************************************
Frontf	t. Rea	ar	_ft.	Side RT	Left
Lot width	ft.	Lot area		Sq. ft.	Living Area
Dist. Between b					
Approved				enied	
Signature					Date
Reason Denied					-

South Haven Charter Township Zoning Permit Application & Permit

1. Required Information:
Job address:
Property Tax No: 80-17-
Owner Name:
Owner mailing address:
Owner mailing address: Owner phone: Email:
Applicant (if different than owner) name:
Applicant address:
Applicant address: Applicant phone:Email:
2. Describe proposed project:
 3. Site Plan: Use the other side of this sheet or a separate sheet to draw a site plan showing <u>all</u> the following items: 1. Dimension of the lot (all sides) 2. Location, distance to lot lines, of all exiting and proposed structures [Front setback is measured from the right-of-way not the center of the road] 3. Dimensions and distance between all existing and proposed structures 4. Location of roads, including center line and right-of-way 5. Location of lakes, streams, creek, pond, county drain within 500 feet 6. A north arrow indicating direction of north
4. Proof of ownership: deed, land contract, tax bill, etc
Owner/Applicant Signature Date
► Fee: varies; res \$50; shed \$10, contact ZA for fee
Submit this completed form, site plan, proof of ownership along
with the Building Permit application to Building Department:
Michigan Township Services-Allegan, Inc.
111 Grand St, Allegan MI 49010
1-800-626-5964 email mtsallegan@frontier.com
Note: A site inspection to verify setback may be required prior to approval.
OFFICE USE ONLY
Zoning District: Zoning Permit Approval Zoning Permit Approval
Required regulations
Front: Water Rear: sides:
Min lot width: Min lot area: Max lot cover: Max Bldg height: Min living area: Min Dwell width
wax blag noight will hving atca will bwen width
Zoning Administrator Associated Association
Zoning Administrator Approval Signature Approval Date
Approval Condition(s):
Zoning Administrator Denial Signature Denial Date Application denied: reason(s)

Michigan Township Services-Allegan. Inc 111 Grand Street, Allegan MI 49010 1-800-626-5964 * 269-673-3239 Fax 269-673-9583 Email mtsallegan@frontier.com

Agent Authorization

Date:
Job Address:
City or Township:
This is to inform you that I, (owner name), as owner of the above referenced property authorize (agent name), to act as my agent in seeking / obtaining
various permits and approvals on my behalf.
These include:
Various Township/City Zoning and Building approvals Other County or State permit approvals Others as needed
Property Owner Signature and Phone Number

This completed form must be submitted with a zoning/building permit application. Permits will not be issued without it.