

# APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

Grayling Charter Township

2090 Viking Way \* P.O. Box 521

Grayling, MI 49738

989-348-2373 \* Fax: 989-348-6713 \* dixongraylingtwp@yahoo.com

AUTHORITY: PA 230 of 1972, as amended COMPLETION: Mandatory to obtain permit PENALTY: Permit will not be issued	The Department will not discriminate against any individual or group because of race , sex, religion, age, national origin, color, martial status, handicap, or political beliefs.
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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

<b>I. PROJECT INFORMATION</b>				
PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND		
<b>II. IDENTIFICATION</b>				
A. OWNER OR LESSEE		EMAIL:		
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE	
B. ARCHITECT OR ENGINEER		EMAIL:		
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE	
LICENSE NUMBER		EXPIRATION DATE		
C. CONTRACTOR		EMAIL:		
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE	
BUILDERS LICENSE NUMBER		EXPIRATION DATE		
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION				
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION				
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>				
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 SETUP    8. <input type="checkbox"/> PRE-MANUFACTURE    10. <input type="checkbox"/> SPECIAL INSPECTION				
B. PERMITS REQUIRED				
1. <input type="checkbox"/> BUILDING    2. <input type="checkbox"/> ELECTRICAL    3. <input type="checkbox"/> MECHANICAL    4. <input type="checkbox"/> PLUMBING    5. <input type="checkbox"/> FOUNDATION				

**IV. PROPOSED USE OF BUILDING**

**A. RESIDENTIAL**

1.  ONE FAMILY                      3.  HOTEL/MOTEL \_\_\_\_\_ # OF UNITS                      5.  DETACHED GARAGE  
2.  2 OR MORE UNITS \_\_\_\_\_ # OF UNITS                      4.  ATTACHED GARAGE                      6.  OTHER

**B. NON-RESIDENTIAL**

7.  AMUSEMENT                      11.  SERVICE STATION                      15.  SCHOOL/LIBRARY/EDUCATIONAL  
8.  CHURCH/RELIGION                      12.  HOSPITAL/INSTITUTION                      16.  STORE/MERCANTILE  
9.  INDUSTRIAL                      13.  OFFICE/BANK/PROFESSIONAL                      17.  TANKS/TOWERS  
10.  PARKING GARAGE                      14.  PUBLIC UTILITY                      18.  OTHER

Non-Residential - Describe in detail proposed use of building, e.g. food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

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**V. SELECTED CHARACTERISTICS OF BUILDING**

**A. PRINCIPAL TYPE OF FRAME**

1.  MASONRY/WALL BEARING    2.  WOOD FRAME    3.  ELECTRICITY    4.  REINFORCED CONCRETE    5.  OTHER

**B. PRINCIPLEAL 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

**E. TYPE OF MECHANICAL**

15. WILL THERE BE AIR CONDITIONING?     YES     NO    16. WILL THERE BE FIRE SUPPRESSION?     YES     NO

**F. DIMENSIONS/DATA**

		EXISTING	ALTERATIONS	NEW
17. NUMBER OF STORIES	_____			
18. USE OF GROUP	_____			
19. CONSTRUCTION TYPE	_____			
20. # OF OCCUPANTS	_____			

**G. NUMBER OF OFF-STREET PARKING SPACES**

22. ENCLOSED \_\_\_\_\_                      23. OUTDOORS \_\_\_\_\_

**VI. SITE OR PLOT PLAN - FOR APPLICANT USE**

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDES THE FOLLOWING INFORMATION

NAME	ADDRESS	EMAIL
CITY	STATE	ZIP
		PHONE

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 confirm 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 subject to civil fines.

SIGNATURE OF APPLICANT  
X \_\_\_\_\_

PLAN REVIEW FEE ENCLOSED _____	BUILDING PERMIT FEE ENCLOSED _____
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**VII. LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION**

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				

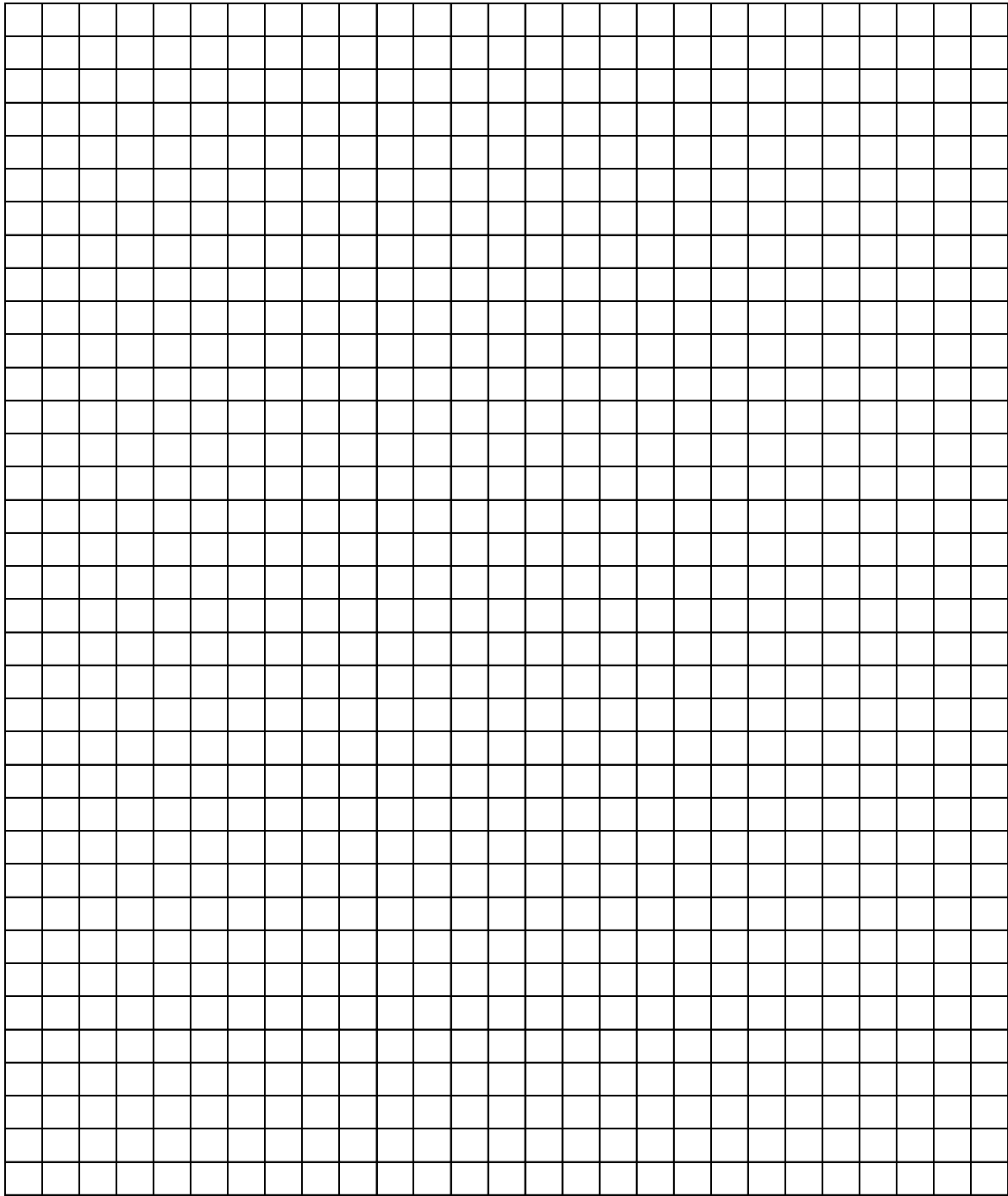
**VIII. VALIDATION FOR DEPARTMENT USE ONLY**

USE GROUP _____	BASE FEE _____
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____
SQUARE FEET _____	

X \_\_\_\_\_  
APPROVAL SIGNATURE

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

IX. SITE OR PLOT PLAN FOR APPLICANT USE



DIRECTIONS TO SITE: