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

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												
СІТҮ	VILLAGE	TOWNSHIP	COUNTY ZIP CODE										
BETWEEN AND													
II. IDENTFICATION													
A. OWNER OR LESSEE		EMAIL:											
NAME	ADDRESS												
СІТҮ	STATE	ZIP CODE	TELEPHONE										
B. ARCHITECT OR ENGINEER	EMAIL:												
NAME	ADDRESS												
СІТҮ	STATE	ZIP CODE	TELEPHONE										
LICENSE NUMBER		EXPIRATION DATE											
C. CONTRACTOR		EMAIL:											
NAME	ADDRESS												
СІТҮ	STATE	ZIP CODE	TELEPHONE										
BUILDERS LICENSE NUMBER		EXPIRATION DATE											
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEN	IPTION	•											
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTIO	N												
III. TYPE OF IMPROVEMENT AND PLAN R	EVIEW												
A. TYPE OF IMPROVEMENT													
1. New BUILDING 3. ALTERATION	5. DEMOLITION	7. 🗌 FOUNDATIO	NONLY 9. 🗌 RELOCATION										
2. 🗆 ADDITION 4. 🗆 REPAIR	6. O MOBILE-HOME SE	TUP 8. 🗌 PRE-MANUF	ACTURE 10. SPECIAL INSPECTION										
B. PERMITS REQUIRED													
1. 🗌 BUILDING 2. 🗌 ELECTRICAL	3. 🗌 MECHANICAL	4. 🗌 PLUMBING	5. 🗌 FOUNDATION										

IV. PROPOSED USE OF BUILDING										
A. RESIDENTIAL										
1. 🗌 ONE FAMILY	3.		# OF UNITS	5.	DETACHED GARAGE					
2. 2 OR MORE UNITS# OF UN	IITS 4.	ATTACHED GARA	GE	6.	☐ OTHER					
B. NON-RESIDENTIAL										
7. 🗌 AMUSEMENT	11.	SERVICE STATION		15.	SCHOOL/LIBRARY/EDUCATIONAL					
8. 🗌 CHURCH/RELIGION	12. HOSPITAL/INSTITUTION 16. STORE/MERCANTIL									
9. 🗌 INDUSTRIAL	13. OFFICE/BANK/PROFESSIONAL 17. TANKS/TOWERS									
10. 🗌 PARKING GARAGE	14.	PUBLIC UTILITY		18.	□ OTHER					
Non-Residential - Describe in detail pro hospital, elementary school, secondary building, office building at industrial pla	school, co	ollege, parochial sc	hool, parking garag	ge for depart	tment store, rental office					
V. SELECTED CHARACTERISTICS OF BUI	LDING									
A. PRINCIPAL TYPE OF FRAME										
1.	WOOD F	RAME 3 . 🗌 ELE	CTRICITY 4. 🗌 R	EINFORCED CO	DNCRETE 5. OTHER					
B. PRINCIPEAL TYPE OF HEATING FUEL										
6. 🗌 GAS 7. 🗌 OIL	8.		9. 🗆 0	COAL	10. 🗌 OTHER					
C. TYPE OF SEWAGE DISPOSAL										
11. 🔲 PUBLIC OR PRIVATE COMPANY			12. 🗌 SEPTIC SYST	EM						
D. TYPE OF WATER SUPPLY										
13. 🗌 PUBLIC OR PRIVATE COMPANY			14. 🗌 PRIVATE WE	ELL OR CISTERN						
E. TYPE OF MECHANICAL										
15. WILL THERE BE AIR CONDITIONING?		YES 🗌 NO	16. WILL THERE B	E FIRE SUPPRE	SSION? 🗌 YES 🗌 NO					
F. DIMENSIONS/DATA										
			EXISTING	ALTER	ATIONS NEW					
17. NUMBER OF STORIES	21.	FLOOR AREA:								
18. USE OF GROUP		BASEMENT								
19. CONSTRUCTION TYPE		1ST & 2ND FLOOR								
20. # OF OCCUPANTS		3RD-10TH FLOOR								
		11TH- ABOVE FLOOR								
		TOTAL AREA								
G. NUMBER OF OFF-STREET PARKING SPA	ACES									
22 ENCLOSED		23. OUTDOORS								

VI. SITE OR PLOT PLAN -	FOR APPLICANT USE								
APPLICANT IS RESPONSIBLE FOLLOWING INFORMATION	FOR THE PAYMENT OF ALL FEE	ES AND CHARGES A	PPLICABLE TO THIS APPI	LICATION AND MUST P	PROVIDES THE				
NAME	ADDRESS			EMAIL	EMAIL				
СІТҮ	STATE		ZIP	PHONE					
application as his/her autho	posed work is authorized by th rized agent, and we agree to c to the best of my knowledge.								
	state construction code act of 19 requirements of this state relating structure. Vio	to persons who are t							
SIGNATURE OF APPLICANT									
х									
PLAN REVIEW FEE ENCLOSE	D	BUII DING PE	RMIT FEE ENCLOSED						
	T AGENCY TO COMPLETE TH								
	ENVIRG	ONMENTAL CONTRO	OL APPROVALS						
	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								
VIII. VALIDATION FOR DE	PARTMENT USE ONLY								
USE GROUP			BASE FEE						
TYPE OF CONSTRUCTION			NUMBER OF INSPECTIONS						
SQUARE FEET									
x									
APPROVAL SIGNATURE									
TITLE			DATE						

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DIRECTIONS TO SITE: