

# BUILDING PERMIT APPLICATION

TOWNSHIP OF CONCORD  
CONCORD, MICHIGAN 49237  
Phone: 517-524-6804 FAX: 517-524-6805

## I. LOCATION OF BUILDING

Address			
City/Village	Township	County	Zip Code
Between		and	

## II. IDENTIFICATION

### A. OWNER OR LESSEE

NAME		TELEPHONE #	
ADDRESS	CITY	STATE	ZIP CODE

### B. ARCHITECT OR ENGINEER

NAME		TELEPHONE #	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NO.	EXPIRATION DATE		

### C. CONTRACTOR

NAME		TELEPHONE #	
ADDRESS	CITY	STATE	ZIP CODE
BUILDERS LICENSE NUMBER	EXPIRATION DATE		
FEDERAL EMPLOYER ID NO. OR REASON FOR EXEMPTION			
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION			

## III. TYPE OF IMPROVEMENT AND PLAN REVIEW

### A. TYPE OF IMPROVEMENT

1.  New Building    2.  Addition    3.  Alteration    4.  Repair    5.  Wrecking  
6.  Mobile Home Set-up    7.  Foundation Only    8.  Premanufacture    9.  Relocation

### B. REVIEW(S) TO BE PERFORMED

Building     Plumbing     Mechanical     Electrical     Energy

**IV. PROPOSED USE OF BUILDING**

**A. RESIDENTIAL - For "wrecking", show most recent use**

14. <input type="checkbox"/> One Family	15. <input type="checkbox"/> Two or More Family (no. of units _____)	16. <input type="checkbox"/> Hotel, Motel (no. of units _____)
17. <input type="checkbox"/> Attached Garage	18. <input type="checkbox"/> Detached Garage	19. <input type="checkbox"/> Other

**B. NON-RESIDENTIAL - For "wrecking", show most recent use**

20. <input type="checkbox"/> Amusement	21. <input type="checkbox"/> Church, Religious	22. <input type="checkbox"/> Industrial
23. <input type="checkbox"/> Parking Garage	24. <input type="checkbox"/> Service Station	25. <input type="checkbox"/> Hospital, Institutional
26. <input type="checkbox"/> Office, Bank, Professional	27. <input type="checkbox"/> Public Utility	28. <input type="checkbox"/> School, Library, Educational
29. <input type="checkbox"/> Store, Mercantile	30. <input type="checkbox"/> Tanks, Towers	31. <input type="checkbox"/> Other

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

\_\_\_\_\_

\_\_\_\_\_

**V. SELECTED CHARACTERISTICS OF BUILDING**

**A. PRINCIPAL TYPE OF FRAME**

1. <input type="checkbox"/> Masonry, Wall Bearing	2. <input type="checkbox"/> Wood Frame	3. <input type="checkbox"/> Structured Steel
4. <input type="checkbox"/> Reinforced Concrete	5. <input type="checkbox"/> Other	6. <input type="checkbox"/> Post & Beam (Pole)

**B. PRINCIPAL TYPE OF HEATING FUEL**

6. <input type="checkbox"/> Gas	7. <input type="checkbox"/> Oil	8. <input type="checkbox"/> Electricity	9. <input type="checkbox"/> Coal	10. <input type="checkbox"/> Other _____
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**C. TYPE OF SEWAGE DISPOSAL**

11. <input type="checkbox"/> Public or Private Company	12. <input type="checkbox"/> Septic System
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**D. TYPE OF WATER SUPPLY**

13. <input type="checkbox"/> Public or Private Company	14. <input type="checkbox"/> Private Well or Cistern
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**E. TYPE OF MECHANICAL**

15. Will there be air conditioning <input type="checkbox"/> yes <input type="checkbox"/> no	16. Will there be an elevator <input type="checkbox"/> yes <input type="checkbox"/> no
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**F. DIMENSIONS**

Length \_\_\_\_\_ Width \_\_\_\_\_ Height: \_\_\_\_\_

17. Number of stories \_\_\_\_\_ 18. Floor Area: 1st & 2nd Floor \_\_\_\_\_

3rd - 10th Floor \_\_\_\_\_ 11th - Above Floor \_\_\_\_\_

Total Area (Sq. Ft.) \_\_\_\_\_ 19. Total Land Area (Sq. Ft.) \_\_\_\_\_

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

20. Enclosed _____	21. Outdoors _____
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# VI. APPLICANT INFORMATION

**APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES REQUIRED WITH THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:**

NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NO. (INCLUDE AREA CODE)
FEDERAL EMPLOYER ID NUMBER (or reason for exemption)			

I HERELY 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 thi 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**

BUILDING PERMIT FEE ENCLOSED (\$75.00 Per Inspection)

(The first \$75.00 of an application is non-refundable) \$ \_\_\_\_\_

## VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

### ENVIRONMENTAL CONTROL APPROVALS

	REQUIRED?	APPROVED	DATE	NUMBER	BY
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 Department Use Only

USE GROUP \_\_\_\_\_ APPLICATION FEE (non-refundable) \_\_\_\_\_

TYPE OF CONSTRUCTION \_\_\_\_\_ NUMBER OF INSPECTIONS \_\_\_\_\_

SQUARE FEET \_\_\_\_\_ APPROX. TOTAL COST: \_\_\_\_\_

APPROVAL SIGNATURE	TITLE	DATE
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