

BUILDING PERMIT APPLICATION

DATE: _____ TYPE OF IMPROVEMENT: _____

BERTRAND CHARTER TOWNSHIP ~ 3835 BUFFALO ROAD ~ BUCHANAN, MI 49107

LOCATION: _____ CITY: _____

PROPERTY OWNER: _____ PHONE NUMBER: _____

CURRENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

LOT FRONT REAR SIDE ZONING NUMBER NUMBER
SIZE _____ YARD _____ YARD _____ YARD _____ DISTRICT _____ OF ROOMS _____ OF BATHS _____

BUILDING IS TO BE _____ FT. WIDE BY _____ FT. LONG BY _____ FT. HIGH. TOTAL SQ. FT. _____

WALLS: 2x _____, _____ INCHES ON CENTER. **PROPERTY TAX NUMBER:**

ROOF: TRUSS _____, RAFTER 2x _____, _____ INCHES ON CENTER. **11-05-**

BASEMENT: _____, CRAWL SPACE _____, SLAB ON GRADE _____.

FLOOR: TRUSS _____, JOIST 2x _____, _____ INCHES ON CENTER.

HEATING: GAS _____ OIL _____ ELECTRIC _____ A/C _____ HEAT PUMP _____

ENCLOSE 3 COPIES OF PLANS INCLUDING: PLOT PLAN, FOUNDATION, WALL/ROOF, ELECTRICAL, MECHANICAL, PLUMBING, ENERGY CALCULATIONS.

SEPTIC PERMIT # _____ SEWER HOOK-UP PERMIT # _____

SOIL EROSION PERMIT # _____ FLOOD ZONE PERMIT # _____

REMARKS: _____

CONTRACTOR: _____ PHONE: _____ CELL: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

MICHIGAN BUILDERS LICENSE #: _____ EXPIRATION DATE: _____

FEDERAL ID# OR REASON FOR EXEMPTION: _____

WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION: _____

MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION: _____

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 CODES ACT OF 1972, ACT NO. 230 OF PUBLIC ACTS OF 1972, BEING SECTION 125.152a OF MICHIGAN COMPILED LAWS, PROHIBITS A PERSON FROM CONSPIRING TO CIRCUMVENT THE LICENSING REQUIREMENTS OF THIS STATE RELATING TO PERSONS WHO PERFORM WORK ON RESIDENTIAL BUILDING OR A RESIDENTIAL STRUCTURE. VIOLATIONS OF SECTION 23a ARE SUBJECTED TO CIVIL FINES."

HOME OWNER'S AFFIDAVIT:

I HEREBY CERTIFY THE WORK DESCRIBED ON THIS PERMIT SHALL BE INSTALLED BY **MYSELF** IN MY SINGLE FAMILY DWELLING IN WHICH I AM LIVING OR ABOUT TO OCCUPY. **ALL WORK SHALL BE INSTALLED IN ACCORDANCE WITH ALL CURRENT CODES AND SHALL NOT BE ENCLOSED, COVERED UP, OR PUT INTO OPERATION UNTIL IT HAS BEEN INSPECTED AND APPROVED BY THE INSPECTOR.** I WILL COOPERATE WITH THE INSPECTOR AND ASSUME THE RESPONSIBILITY TO ARRANGE FOR NECESSARY INSPECTIONS.

PROJECT COST: \$ _____

FEE ENCLOSED: \$ _____

HOME OWNER or CONTRACTOR

BUILDING OFFICIAL

**FOOTING INSPECTION REQUESTS MUST BE MADE AT LEAST 48 HOURS IN ADVANCE
ALL OTHER INSPECTIONS REQUEST 24 HOURS IN ADVANCE – Contact Todd Herter 269-208-3109**