

# CHARTER TOWNSHIP OF GRASS LAKE

373 Lakeside Dr. PO Box 216, Grass Lake, MI 49240 Phone: 517.522.8464 Fax: 517.522.4955

## APPLICATION FOR BUILDING PERMIT, ZONING COMPLIANCE REVIEW, AND PLAN EXAMINATION

AUTHORITY: P.A. 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, marital status, handicap, or political beliefs.
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**APPLICANT MUST SUPPLY ALL INFORMATION IN SECTION I, II, III, IV, V AND VI**  
 In order to avoid delay – all forms must be completely filled out and plans must contain required information.  
 NOTE: Separate applications must be completed for electrical, mechanical, and plumbing permits

### I. PROJECT INFORMATION

Project Name		Address	
Lot Number	Parcel #		

### II. IDENTIFICATION

<input type="checkbox"/> Owner or <input type="checkbox"/> Lessee			
Name	Address		Phone
			Cell Phone
City	State	Zip Code	Facsimile
			E-mail
Architect or Engineer <input type="checkbox"/> Check box if not applicable			
Name	Address		Phone
			Cell Phone
City	State	Zip Code	Facsimile
			E-mail
License/Registration Number		Expiration Date	
Contractor <input type="checkbox"/> Check box if not applicable			
Name	Address		Phone
			Cell Phone
City	State	Zip Code	Facsimile
			E-mail
Builders License Number		Expiration Date	Federal Employer ID Number or Reason For Exception
Workers Comp Insurance Carrier or Reason For Exception		MESC Employer Number or Reason For Exception	

### III. PROJECT DESCRIPTION, TYPE OF IMPROVEMENT AND PLAN REVIEW

Detailed Description of Project _____ _____	Estimated Cost of Construction \$ _____
Type of Improvement – Check box(es) that are applicable	
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 Set-up      8. <input type="checkbox"/> Premanufactured      10. <input type="checkbox"/> Other _____	
Review(s) requested to be performed <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Foundation <input type="checkbox"/> Other _____	

**IV. PROPOSED USE OF BUILDING/IMPROVEMENT**

<b>RESIDENTIAL</b>			<input type="checkbox"/> CHECK BOX IF NOT APPLICABLE		
1. <input type="checkbox"/> One Family	4. <input type="checkbox"/> Detached Accessory Structure (>200s.f.)	7. <input type="checkbox"/> Pool/Hot Tub			
2. <input type="checkbox"/> Duplex	5. <input type="checkbox"/> Attached Garage	8. <input type="checkbox"/> Deck/Porch			
3. <input type="checkbox"/> Multi-Family, No. of units _____	6. <input type="checkbox"/> Mobile Home	9. <input type="checkbox"/> Other _____			
<b>NON-RESIDENTIAL</b>			<input type="checkbox"/> CHECK BOX IF NOT APPLICABLE		
10. <input type="checkbox"/> Amusement	14. <input type="checkbox"/> Service Station	18. <input type="checkbox"/> School, Library, Educational			
11. <input type="checkbox"/> Church, Religion	15. <input type="checkbox"/> Hospital, Institutional	19. <input type="checkbox"/> Store, Mercantile			
12. <input type="checkbox"/> Industrial	16. <input type="checkbox"/> Office, Bank, Professional	20. <input type="checkbox"/> Tanks, Towers			
13. <input type="checkbox"/> Parking Garage	17. <input type="checkbox"/> Public Utility	21. <input type="checkbox"/> Other _____			
<p><b>NON-RESIDENTIAL:</b> Describe in detail the proposed use of the 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. Please indicate multiple uses separately (e.g. office and machine shop).</p> <p>_____</p> <p>_____</p>					

**V. SELECTED CHARACTERISTICS OF BUILDING**

<b>A. PRINCIPAL TYPE OF FRAME</b>					
1. <input type="checkbox"/> Masonry, Wall Bearing	2. <input type="checkbox"/> Wood Frame	3. <input type="checkbox"/> Structural Steel	4. <input type="checkbox"/> Reinforced Concrete	5. <input type="checkbox"/> Other	
<b>B. PRINCIPAL TYPE OF HEATING FUEL</b>					
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	
<b>C. TYPE OF SEWAGE DISPOSAL</b>		<b>D. TYPE OF WATER SUPPLY</b>		<b>E. NUMBER OF BATHROOMS</b>	
11. <input type="checkbox"/> Public or Private Company		13. <input type="checkbox"/> Public or Private Company		<input type="checkbox"/> 1 - 2 ½	
12. <input type="checkbox"/> Septic System		14. <input type="checkbox"/> Private Well or Cistern		<input type="checkbox"/> 3 - 3 ½	
				<input type="checkbox"/> > 4 How many? _____	
<b>F. TYPE OF MECHANICAL</b>					
15. Will there be air conditioning?		<input type="checkbox"/> Yes <input type="checkbox"/> No		16. Will there be fire suppression?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>G. DIMENSIONS/DATA</b>					
17. Number of Stories	_____	21. Floor Area:	Existing	Alterations	New
18. Use Group	_____	Basement	_____	_____	_____
19. Const. Type	_____	1st Floor	_____	_____	_____
20. No. of Occupants	_____	2nd Floor	_____	_____	_____
<b>H. NUMBER OF OFF STREET PARKING SPACES</b>					
<input type="checkbox"/> Enclosed _____			<input type="checkbox"/> Outdoors _____		

**VI. APPLICANT INFORMATION**

Name (Print)		Address	
City	State	Zip Code	Phone Number
Drivers License Number			Date of Birth
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 Charter Township of Grass Lake and 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 ( <u>Homeowner signature indicates compliance with Section VII, Homeowner Affidavit</u> )			Date

**VII. HOMEOWNER AFFIDIVAT**

I hereby certify the building work described on this permit application shall be installed by myself in my own home in which I am living or about to occupy. All work shall be installed in accordance with the Building Code and shall not be enclosed, covered, used, or put into operation until it has been inspected and approved by the Building Inspector. I will cooperate with the Building Inspector and assume responsibility to arrange for necessary inspections.

**VIII. GENERAL INFORMATION:**

**GENERAL:** Building work shall not be started until the application for permit has been filed. **No work shall be concealed until it has been inspected.** When ready for an inspection, call the inspector providing at least 24 hours advance notice. The inspector will need the **job location** and **permit #.**

**OCCUPANCY PERMITS: NO OCCUPANCY PERMITS WILL BE ISSUED OR PERSONS ALLOWED TO MOVE ON THE PREMISES UNTIL FINAL APPROVAL HAS BEEN RECEIVED FOR ALL BUILDING, MECHANICAL, PLUMBING, ELECTRICAL AND/OR ALL WELL/SEPTIC WORK PERFORMED ON THE PREMISES, IN ADDITION TO ZONING DEPARTMENT APPROVAL. ALL REINSPECTION FEES MUST ALSO BE PAID.**

**EXPIRATION OF PERMIT:** A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED OR REINSTATED.** The building official is authorized to grant an extension of the permit for 180 days. The extension shall be requested in writing and justifiable cause demonstrated. A maximum of two extensions are allowed. A \$50 fee will be assessed for the first extension and a fee half of the original permit cost for the second extension.



**X. FEE CHART/SCHEDULE – Applicant is responsible for the payment of all fees and charges applicable to this application.**

**RESIDENTIAL RATES**

INSPECTION	FEE	# OF INSPECTIONS	TOTAL
<b>Base Fee – Required on all permits</b>	<b>\$50.00</b>		<b>\$50.00</b>
Footing Inspection	\$75.00		
Post Hole Inspection	\$75.00		
Rough Inspection	\$75.00		
Final Inspection	\$75.00		
Temporary Final Inspection	\$75.00		
Demolition Inspection	\$75.00		
Additional Inspection	\$75.00		
Backfill Inspection	\$75.00		
Insulation Inspection	\$75.00		
Ice Guard/Flashing/Ventilation Inspection	\$75.00		
New Address Fee	\$15.00		
New Contractor Fee	\$20.00		
Annual Contractor Fee	\$15.00		
Zoning Compliance Review Fee	\$35.00		
<b>TOTAL FEES - Residential</b>			<b>\$ _____</b>

**NON-RESIDENTIAL RATES**

INSPECTION	FEE	# OF INSPECTIONS	TOTAL
<b>Base Fee – Required on all permits</b>	<b>\$50.00</b>		<b>\$50.00</b>
Footing Inspection	\$75.00		
Post Hole Inspection	\$75.00		
Backfill Inspection	\$75.00		
Insulation Inspection	\$75.00		
Rough Inspection	\$75.00		
Final Inspection	\$75.00		
Additional Inspection	\$75.00		
Zoning Compliance Review Fee	\$100.00		

<b>TOTAL FEES – Non-Residential</b>			<b>\$ _____</b>
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<b>Plan Review Fee -</b> \$100.00 or one tenth of one percent (.1%) Of construction cost, whichever is greater			
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**XI. VALIDATION – LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION**

Property Tax ID # \_\_\_\_\_

Building Permit Number PB \_\_\_\_\_

Building Permit Issued Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Approved By: \_\_\_\_\_

Building Permit Fee \$ \_\_\_\_\_

Building Inspector

Zoning District \_\_\_\_\_

Use \_\_\_\_\_

Front Yard \_\_\_\_\_

Side Yard \_\_\_\_\_

Side Yard \_\_\_\_\_

Rear Yard \_\_\_\_\_

Notes \_\_\_\_\_

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Approved By:

\_\_\_\_\_  
Zoning Administrator

Revised 3/10/2022  
shared>(G) >building department>new bldg. zoning application + bldg. fee schedule