

# APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

Grayling Charter Township  
 2090 Viking Way • P.O. Box 521  
 Grayling, MI 49738

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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, marital 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		
CITY	VILLAGE	TOWNSHIP	COUNTY
BETWEEN	AND		
			ZIP CODE

## II. IDENTIFICATION

### A. OWNER OR LESSEE

NAME	ADDRESS	EMAIL:
CITY	STATE	ZIP CODE
		TELEPHONE

### B. ARCHITECT OR ENGINEER

NAME	ADDRESS	EMAIL:
CITY	STATE	ZIP CODE
		TELEPHONE
LICENSE NUMBER	EXPIRATION DATE	

### C. CONTRACTOR

NAME	ADDRESS	EMAIL:
CITY	STATE	ZIP CODE
		TELEPHONE
BUILDERS LICENSE NUMBER	EXPIRATION DATE	

FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION

WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION

MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION

## III. TYPE OF IMPROVEMENT AND PLAN REVIEW

### 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.

**V. SELECTED CHARACTERISTICS OF BUILDING**

**A. PRINCIPAL TYPE OF FRAME**

- 1.  MASONRY/WALL BEARING
- 2.  WOOD FRAME
- 3.  STRUCTURAL STEEL
- 4.  REINFORCED CONCRETE
- 5.  OTHER

**B. PRINCIPAL 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 \_\_\_\_\_
- 21. FLOOR AREA: \_\_\_\_\_
- 18. USE 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 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 PROVIDE THE FOLLOWING INFORMATION

NAME	ADDRESS	EMAIL
CITY	STATE	ZIP
FEDERAL ID NUMBER/SOCIAL SECURITY NUMBER		TELEPHONE

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 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 subjected to civil fines.*

SIGNATURE OF APPLICANT

X

PLAN REVIEW FEE ENCLOSED \_\_\_\_\_

BUILDING PERMIT FEE ENCLOSED \_\_\_\_\_

**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

A large grid of graph paper, consisting of 20 columns and 20 rows of small squares. The grid is intended for use as a site or plot plan for an applicant.

DIRECTIONS TO SITE