

Township of Blissfield

DEPARTMENT OF ZONING AND BUILDING INSPECTION
 Lenawee County, Michigan
Building Inspector and Zoning Administrator:
Todd Roach Ph 517-937-9050

Include check payable to Blissfield Township

Return to: Todd Roach
17866 Lulu Rd.
Petersburg MI. 49270
troach@cass.net

APPLICATION FOR
PLAN EXAMINATION AND
BUILDING PERMIT

IMPORTANT- Applicant to complete all items in sections: I,II,III, IV, V and VI.

1 LOCATION OF BUILDING	AT LOCATION _____ ZONING DISTRICT _____
	(AT) _____ (STREET)
	BETWEEN _____ AND _____
	(CROSS STREET) _____ (CROSS STREET)
TAX ID _____ PAO _____ LOT _____ BLOCK _____ SIZE _____	

II. TYPE AND COST OF BUILDING- All applicants complete A - D

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New Building</p> <p>2 <input type="checkbox"/> Addition (if residential, enter new housing units added, if any, in Part D, 13)</p> <p>3 <input type="checkbox"/> Alteration (See 2 Above)</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Wrecking (if multifamily residential, enter number of units in building in Part D, 14)</p> <p>6 <input type="checkbox"/> Tearoff/Reroof</p> <p>7 <input type="checkbox"/> Moving (relocation)</p> <p>8 <input type="checkbox"/> Foundation Only</p>	<p>D. PROPOSED USE - <i>for "Wrecking" most recent use</i></p> <table style="width:100%;"> <tr> <td style="width:50%; vertical-align: top;"> <p>RESIDENTIAL</p> <p>13 <input type="checkbox"/> One Family</p> <p>14 <input type="checkbox"/> Two or more family-Enter number of units.....</p> <p>15 <input type="checkbox"/> Transient hotel, motel, or dormitory-Enter <i>number of units</i>.....</p> <p>16 <input type="checkbox"/> Garage</p> <p>17 <input type="checkbox"/> Carport</p> <p>18 <input type="checkbox"/> Other-<i>Specify</i> _____</p> </td> <td style="width:50%; vertical-align: top;"> <p>NONRESIDENTIAL</p> <p>19 <input type="checkbox"/> Amusement, recreational</p> <p>20 <input type="checkbox"/> Church, other religious</p> <p>21 <input type="checkbox"/> Industrial</p> <p>22 <input type="checkbox"/> Parking Garage</p> <p>23 <input type="checkbox"/> Service Station, repair garage</p> <p>24 <input type="checkbox"/> Hospital, institutional</p> <p>25 <input type="checkbox"/> Office, bank, professional</p> <p>26 <input type="checkbox"/> Public utility school, library, other educational</p> <p>27 <input type="checkbox"/> _____</p> <p>28 <input type="checkbox"/> Stores, mercantile</p> <p>29 <input type="checkbox"/> Tanks, towers</p> <p>30 <input type="checkbox"/> Other-<i>Specify</i> _____</p> </td> </tr> </table>	<p>RESIDENTIAL</p> <p>13 <input type="checkbox"/> One Family</p> <p>14 <input type="checkbox"/> Two or more family-Enter number of units.....</p> <p>15 <input type="checkbox"/> Transient hotel, motel, or dormitory-Enter <i>number of units</i>.....</p> <p>16 <input type="checkbox"/> Garage</p> <p>17 <input type="checkbox"/> Carport</p> <p>18 <input type="checkbox"/> Other-<i>Specify</i> _____</p>	<p>NONRESIDENTIAL</p> <p>19 <input type="checkbox"/> Amusement, recreational</p> <p>20 <input type="checkbox"/> Church, other religious</p> <p>21 <input type="checkbox"/> Industrial</p> <p>22 <input type="checkbox"/> Parking Garage</p> <p>23 <input type="checkbox"/> Service Station, repair garage</p> <p>24 <input type="checkbox"/> Hospital, institutional</p> <p>25 <input type="checkbox"/> Office, bank, professional</p> <p>26 <input type="checkbox"/> Public utility school, library, other educational</p> <p>27 <input type="checkbox"/> _____</p> <p>28 <input type="checkbox"/> Stores, mercantile</p> <p>29 <input type="checkbox"/> Tanks, towers</p> <p>30 <input type="checkbox"/> Other-<i>Specify</i> _____</p>
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<p>B. OWNERSHIP</p> <p>9 <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>10 <input type="checkbox"/> Public (Federal, State, or Local government)</p>			

<p>C. COST</p> <p>11 Cost of improvement..... To be installed but not included in the above cost.</p> <p>a. Electrical.....</p> <p>b. Plumbing.....</p> <p>c. HVAC.....</p> <p>d. Other (elevator, etc.).....</p> <p>12 TOTAL COST OF IMPROVEMENT _____</p>	(Omit cents)	<p>Description of project</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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III. SELECTED CHARACTERISTICS OF BUILDING- For new buildings and additions, complete Parts E -L; for wrecking, complete only Part J, for all others skip to V

<p>E. PRINCIPAL TYPE OF FRAME</p> <p>31 <input type="checkbox"/> Masonry (wall bearing)</p> <p>32 <input type="checkbox"/> Wood frame</p> <p>33 <input type="checkbox"/> Structural steel</p> <p>34 <input type="checkbox"/> Reinforced concrete</p> <p>35 <input type="checkbox"/> Other - <i>Specify</i> _____</p>	<p>G. TYPE OF SEWAGE DISPOSAL</p> <p>41 <input type="checkbox"/> Public or private company</p> <p>42 <input type="checkbox"/> Private (septic tank, etc.)</p> <p>H. TYPE OF WATER SUPPLY</p> <p>43 <input type="checkbox"/> Public or private company</p> <p>44 <input type="checkbox"/> Private (well, cistern.)</p>	<p>J. DIMENSIONS</p> <p>49 Number of stories.....</p> <p>50 Total square feet of floor area, all floors based on exterior dimensions</p> <p>51 Total land area, sq. ft.</p>	
<p>F. TYPE OF HEAT</p> <p>36 <input type="checkbox"/> Gas</p> <p>37 <input type="checkbox"/> Oil</p> <p>38 <input type="checkbox"/> Electricity</p> <p>39 <input type="checkbox"/> Coal</p> <p>40 <input type="checkbox"/> Other</p>	<p>I. TYPE OF MECHANICAL</p> <p><i>Will there be central air conditioning?</i></p> <p>45 <input type="checkbox"/> YES 46 <input type="checkbox"/> NO</p> <p><i>Will there be an elevator?</i></p> <p>47 <input type="checkbox"/> YES 48 <input type="checkbox"/> NO</p>	<p>K. NUMBER OF OFF-STREET PARKING SPACES</p> <p>52 Enclosed.....</p> <p>53 Outdoors.....</p>	<p>L. RESIDENTIAL BUILDINGS ONLY</p> <p>54 Number of bedrooms</p> <p>55 Number of Full..... bathrooms Partial.....</p>

IV. IDENTIFICATION - *To be completed by all applicants*

Name		Mailing Address	Zip Code	Telephone No.
1. Owner or lessee				
2. Contractor	Applicant Name (print)			
	Builders License number		Exp. Date	
	Federal Employer No or Reason for Exemption			
	Workers Comp. Ins. Carrier or Reason for Exemption			
3. Architect or Engineer	Contract, Power of attorney, Letter of Authorization filed w/ Township			

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 authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, 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 residential structure. Violations of Section 23a are subject to civil fines.

Applicant Signature	Address	Date
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V. SITE OR PLOT PLAN DRAWN TO SCALE - *For Applicant Use*