

# BUILDING PERMIT APPLICATION

ARGENTINE TOWNSHIP  
9048 SILVER LAKE ROAD LINDEN MI 48451  
FIRE DEPT. OFFICE (810) 735-4911

Estimated Value of Structure \$	Parcel ID: 01-
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## LOCATION OF BUILDINGS

Address:		
City:	State:	Zip:

## OWNER INFORMATION

Residential Name:		
Address:	Phone: ( )	
City:	State	Zip:

## ARCHITECT OR ENGINEER (if applicable)

Name:		
Address:	Phone: ( )	
City:	State:	Zip:
License No.:	Expiration Date:	

## CONTRACTOR INFORMATION

Name:		
Address:	Phone: ( )	
City:	State:	Zip:
License No:	Expiration Date:	
Federal Employer ID or Reason for Exemption:		
Workers Comp. Insurance Carrier or Reason for Exemption:		
MESC Employer Number or Reason for Exemption:		

## TYPE OF IMPROVEMENT

Residential:							
	New Home/House		Addition		Alteration		Repair
	New Building		Addition		Alteration		Repair
Commercial:							
	New Building		Addition		Alteration		Repair
Accessory Building:							
	Garage, Attached		Garage, Detached		Pole Barn		Shed (over 200 sf)
Misc:							
	Foundation Only		Pre-manufacture		Mobile Home Set-up		
	Deck		Swimming Pool		Other – explain		

PRINCIPAL TYPE OF FRAME							
<input type="checkbox"/>	Masonry, Wall Bearing	<input type="checkbox"/>	Wood Frame	<input type="checkbox"/>	Structured Steel	<input type="checkbox"/>	Reinforced Concrete
<input type="checkbox"/>	Other _____						

PRINCIPAL TYPE OF SEWAGE DISPOSAL	
<input type="checkbox"/>	Sanitary Sewer
<input type="checkbox"/>	Septic System

BUILDING DIMENSIONS – NEW BUILDING(S)			
# of Stories _____	1st Floor Area = _____ square feet	2nd Floor Area= _____ square feet	
Total Area = _____ square feet	Garage Area = _____ square feet		

BUILDING DIMENSIONS – ADDITION(S)			
# of Stories _____	1st Floor Area = _____ square feet	2nd Floor Area= _____ square feet	
Total Area of Addition= _____ square feet	Garage Area being added= _____ square feet		

APPLICANT INFORMATION (if not Owner)			
Name: _____			
Address: _____		Phone: ( ) _____	
City: _____	State _____	Zip: _____	

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 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, 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 residential buildings or a residential structure.  
Violators of Section 23a are subject to civil fines.

Signature of Applicant or Owner: \_\_\_\_\_ Date: \_\_\_\_\_

-----ARGENTINE TOWNSHIP OFFICE USE ONLY – DO NOT NOT WRITE BELOW THIS LINE-----	
Approved	Signature: _____
Not Approved	Title: _____
	Date: _____
Comments:- _____ _____	

Site Plan (All setbacks must be shown for the property)

Indicate direction of North within the circle

