

BUILDING PERMIT INFORMATION CHECKLIST

You must furnish a copy of the following:

- Two sets of drawings with appropriate scales, showing wall and foundation details.
- A site plan, showing the length and width of the property.
- Location of the building on the site plan, measured in feet from all property lines and from all other buildings on the site. Be sure to show all buildings.
- A legal description of the property, a deed or land contract (*must be recorded with Register of Deeds*).
- Soil and Sedimentation Permit if construction is within 500 feet of a lake, river, stream, pond or county drain. Contact the Midland Co. Drain Commission Office at (989) 832-6770.
- Well Permit, Midland Co. Health Dept. 220 W. Ellsworth St. Midland, MI (989) 832-6679.
- Septic Permit, Midland Co. Health Dept. 220 W. Ellsworth St. Midland, MI (989) 832-6679.
- House or Building Address, contact the Midland Co. Housing Commission at 220 W. Ellsworth St. (989) 832-6790.
- Driveway Permit, Midland Co. Road Commission 2334 N. Meridian Rd. Sanford, MI 48657 (989) 687-9060.
- State of Michigan Uniform Energy Code Rules, ANALYSIS COMPARISON REPORT.
- City Water Permit, obtain a Water Service Permit from Village of Sanford plumbing inspector (989) 631-9645. Then obtain a Water Connection Permit from Water District #1, 246 E. Price Rd., Midland, MI (989) 687-2709.

NOTE:

Building, Mechanical and Electrical Permits: If the HOMEOWNER does the work, the homeowner pulls the permit. If you hire a licensed contractor, the contractor pulls the permit. CONTRACTORS MUST BE LICENSED IN THE STATE OF MICHIGAN.

Occupancy Permit: The Certificate of Occupancy will be issued upon approval of all the required inspections. It is illegal to occupy the building prior to obtaining the certificate

I HEREBY CERTIFY: That I have read and examined the application and know the same to be true and correct. All provisions of laws and ordinances governing will be complied with whether specified or not. The granting of permits does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. All listed and required inspections will be called for (48) hours in advance. It shall be the duty of the permit holder to notify the Building Department when work is ready for inspections.

RETURN TO:

Building Department
Village of Sanford
106 Lincoln St.
Sanford, MI 48657
(989) 687-9342

OFFICE AND INSPECTION HOURS BY APPOINTMENT

Building Address Name _____ Address _____ City _____ Tel. No. _____ Owner Name _____ Address _____ City _____ Tel. No. _____ Architect Engineer Name _____ Address _____ City _____ Tel. No. _____ Contractor Name _____ Address _____ City _____ Tel. No. _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">Class of Work</th> </tr> <tr> <td style="width: 33%;">Tower</td> <td style="width: 33%;">Re-Single</td> <td style="width: 33%;">Pool</td> </tr> <tr> <td>Fence</td> <td>Re-Set</td> <td>Pole Bldg.</td> </tr> <tr> <td>Pond</td> <td>Tanks</td> <td>Other</td> </tr> <tr> <td colspan="3">Use of Bldg. _____ Ht. _____</td> </tr> <tr> <td colspan="2">Size of Bldg. _____</td> <td>Families _____</td> </tr> <tr> <td>No. of Fls. _____</td> <td colspan="2">Lot Size _____</td> </tr> <tr> <td colspan="3">No. of Fms. _____</td> </tr> <tr> <td colspan="3">No. and Use of Bldg. now on lot _____</td> </tr> <tr> <td colspan="3">DIMENSIONS/DATA</td> </tr> <tr> <td colspan="3" style="text-align: center;">NUMBER OF STORIES _____</td> </tr> <tr> <td colspan="3" style="text-align: center;">USE GROUP _____</td> </tr> <tr> <td colspan="3" style="text-align: center;">CONST. TYPE _____</td> </tr> <tr> <td colspan="3" style="text-align: center;">NO. OF OCCUPANTS _____</td> </tr> </table>	Class of Work			Tower	Re-Single	Pool	Fence	Re-Set	Pole Bldg.	Pond	Tanks	Other	Use of Bldg. _____ Ht. _____			Size of Bldg. _____		Families _____	No. of Fls. _____	Lot Size _____		No. of Fms. _____			No. and Use of Bldg. now on lot _____			DIMENSIONS/DATA			NUMBER OF STORIES _____			USE GROUP _____			CONST. TYPE _____			NO. OF OCCUPANTS _____		
Class of Work																																											
Tower	Re-Single	Pool																																									
Fence	Re-Set	Pole Bldg.																																									
Pond	Tanks	Other																																									
Use of Bldg. _____ Ht. _____																																											
Size of Bldg. _____		Families _____																																									
No. of Fls. _____	Lot Size _____																																										
No. of Fms. _____																																											
No. and Use of Bldg. now on lot _____																																											
DIMENSIONS/DATA																																											
NUMBER OF STORIES _____																																											
USE GROUP _____																																											
CONST. TYPE _____																																											
NO. OF OCCUPANTS _____																																											

REVIEW(S) TO BE PERFORMED

BUILDING ELECTRICAL MECHANICAL PLUMBING FOUNDATION

BUILDERS LICENSE NO. _____ EXPIRATION DATE _____

FEDERAL EMPLOYER ID NUMBER _____

OR REASON FOR EXEMPTION _____

MESC EMPLOYER NUMBER _____ WORKERS COMP INSURANCE CARRIER _____

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 code act of 1972, 1972 PA 230, MCL 125.1522A, 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. Violators of section 23a are subjected to civil fines.

Bldg Permit No. _____ Date Issued _____

A. VALUATION	
Bldg. Fee _____	Plan Ck. Fee _____
Total _____	

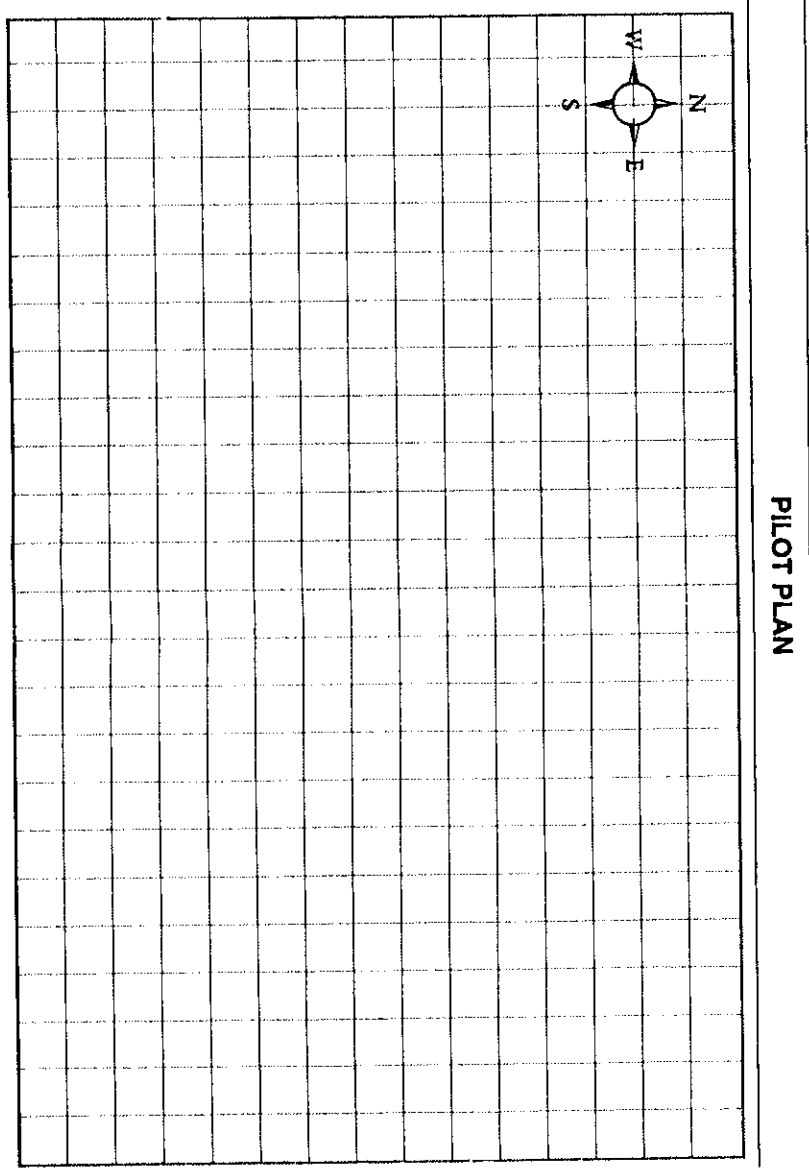
MOBILE HOME OR TRAILER

MANUFACTURER _____

SERIAL NO. _____

DATE OF MANUFACTURE _____

A. PRINCIPLE TYPE OF FRAME 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. PRINCIPAL TYPE OF HEATING FUEL 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
C. TYPE OF SEWAGE DISPOSAL 11. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY 12. <input type="checkbox"/> SEPTIC SYSTEM	D. TYPE OF WATER SUPPLY 13. <input type="checkbox"/> PUBLIC OR PRIVATE COMPANY 14. <input type="checkbox"/> PRIVATE WELL OR CISTERN



I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all Township ordinances and State Laws regarding building construction.

Owner/Builder Social Security No. _____

Applicant Signature _____ Application Date _____

RESIDENTIAL PLANNING DIRECTOR _____ DATE _____
 COMMERCIAL
 INDUSTRIAL BUILDING INSPECTOR _____ DATE _____

Inspector-White Applicant-Yellow Township-Pink