



Green Oak Charter Township

10001 SILVER LAKE ROAD

BRIGHTON MI 48116

OFFICE: 810-231-1333 FAX: 810-231-5090

www.greenoaktwp.com

Application for Building Permit

Authority: 1972 PA 230
Completion: Mandatory to obtain permit
Penalty: Permit will not be issued

Applicant to Complete All Items in Sections 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		
TOWNSHIP	PARCEL ID #	LOT #/SUBDIVISION	COUNTY	ZIP CODE
BETWEEN		AND		ZONING

II. IDENTIFICATION

A. OWNER OR LESSEE

NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	

B. ARCHITECT OR ENGINEER

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

C. CONTRACTOR

NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER	
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 SET-UP	8. <input type="checkbox"/> PREMANUFACTURE	10. <input type="checkbox"/> SPECIAL INSPECTION

B. PLAN REVIEW REQUIRED

Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, except as listed below.

Plans are not required for alterations and repair work determined by the building official to be of a minor nature.

Plans and specifications are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.

Plan Review Submission No. _____

IV. PROPOSED USE OF BUILDING**A. RESIDENTIAL**

1. ONE FAMILY
 2. TWO OR MORE FAMILY NO. OF UNITS _____
3. HOTEL, MOTEL, NO. OF UNITS _____
4. ATTACHED GARAGE
5. DETACHED GARAGE
6. OTHER _____

B. NON-RESIDENTIAL

7. AMUSEMENT
 8. CHURCH, RELIGION
 9. INDUSTRIAL
 10. PARKING GARAGE
11. SERVICE STATION
 12. HOSPITAL, INSTITUTIONAL
 13. OFFICE, BANK, PROFESSIONAL
 14. PUBLIC UTILITY
15. SCHOOL, LIBRARY, EDUCATIONAL
 16. STORE, MERCANTILE
 17. TANKS, TOWERS
 18. OTHER _____

COMPLETE DESCRIPTION OF PROJECT: RESIDENTIAL AND NONRESIDENTIAL-DESCRIBE IN DETAIL PROPOSED BUILDING IF RESIDENTIAL OR FOR NON-RESIDENTIAL 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
 15a. WILL THERE BE A FIREPLACE? YES NO
16. WILL THERE BE FIRE SUPPRESSION? YES NO

F. DIMENSIONS/DATA

		EXISTING		ALTERATIONS		NEW	
		WIDTH	LENGTH	WIDTH	LENGTH	HEIGHT	
17. NUMBER OF STORIES	_____						
18. USE GROUP	_____			SF	SF		SF
19. CONST. TYPE	_____			SF	SF		SF
20. NO. OF OCCUPANTS	_____			SF	SF		SF
	_____			SF	SF		SF
	_____			SF	SF		SF
	_____			SF	SF		SF
NUMBER OF FIREPLACES	<input type="text"/>			SF	SF		SF
				SF	SF		SF

G. NUMBER OF OFF STREET PARKING SPACES

22. ENCLOSED _____
23. OUTDOORS _____

VI. APPLICANT INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.

NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER			

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:

ESTIMATED CONSTRUCTION VALUE: \$ _____

VII. LOCAL GOVERNMENTAL 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				

VII. VALIDATION -FOR DEPARTMENT USE ONLY

USE GROUP	_____	BASE FEE	_____
TYPE OF CONSTRUCTION	_____	NUMBER OF INSPECTIONS	_____
SQUARE FEET	_____		

APPROVAL SIGNATURE _____

TITLE	DATE
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