

**North Branch**  
**BUILDING DEPARTMENT**

**COMMERCIAL**  
**BUILDING PERMIT APPLICATION**

6771 ELM ST. • P.O. BOX 186 • NORTH BRANCH, MI 48461 • GENERAL INFORMATION / INSPECTIONS (810) 688-3031

Job Site \_\_\_\_\_  
 Parcel Number \_\_\_\_\_ N S E W Side of Road \_\_\_\_\_  
 Cross Roads \_\_\_\_\_ and \_\_\_\_\_

**PERMIT TO:**

<input type="checkbox"/> Construct New	<input type="checkbox"/> Accessory Bldg	<input type="checkbox"/> Remodel
<input type="checkbox"/> Demo/Raze	<input type="checkbox"/> Code Compliance	
<input type="checkbox"/> Tower	<input type="checkbox"/> _____	

Base Fee \$200.00

**TYPE:**

<input type="checkbox"/> Office Bldg	<input type="checkbox"/> Square Footage _____ x.35 _____
<input type="checkbox"/> Addition _____	<input type="checkbox"/> Square Footage _____ REMODEL x.25 _____
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Square Footage _____
<input type="checkbox"/> Tower	<input type="checkbox"/> Lattice ____ Monopole ____ (size)
<input type="checkbox"/> Sign	<input type="checkbox"/> Type _____ Size _____
<input type="checkbox"/> Other _____	

<b>CONSTRUCTION:</b>	<i>Foundation Type</i>	<i>Construction Information</i>	<i>Required Permits</i>
<input type="checkbox"/>	Basement Block/Foam	Deck Square Footage _____	<input type="checkbox"/> Septic _____
<input type="checkbox"/>	Basement Poured	Accessory Building Sq. Ft. _____	<input type="checkbox"/> Sewer _____
<input type="checkbox"/>	Basement Wood/Steel	Building Height _____	<input type="checkbox"/> Driveway _____
<input type="checkbox"/>	Reinforced Mat	Living Area Sq. Ft. _____	<input type="checkbox"/> Soil Erosion _____
<input type="checkbox"/>	42" Pole Footing	Garage Sq. Ft. _____	<input type="checkbox"/> Flood Plain _____
<input type="checkbox"/>	Crawl Space Block _____	Number of Stories _____	<input type="checkbox"/> Well _____
	Poured _____	Number of Bathrooms _____	<input type="checkbox"/> Wetlands _____
	Wood _____	Masonry Fireplace _____	
<input type="checkbox"/>	Piers	Masonry Exterior Finishes _____	
<input type="checkbox"/>	OTHER _____		

ADDITIONAL REQUIRED INSPECTIONS # \_\_\_\_\_

\$100.00 Per Inspection \$ \_\_\_\_\_

## NOTICE

IT IS THE APPLICANT'S RESPONSIBILITY TO OBTAIN THIS PERMIT WITHIN SIX (6) MONTHS OF THE APPLICATION DATE OR THE PRINT(S) AND APPLICATION WILL BE DISCARDED. ARRANGEMENTS MAY BE MADE FOR SPECIAL CIRCUMSTANCES.

Please Initial \_\_\_\_\_

### Due to the potential for a utility hazard, the following information **MUST** be provided:

1. Will footings be trenched near poles, guy wires, anchors? .....  YES  NO
2. Will any structure be built under or near overhead lines?.....  YES  NO
3. Are there any overhead or underground wires on site? .....  YES  NO
4. Will any wells be drilled under or near overhead wires?.....  YES  NO
5. Will any antenna be erected on the property which would be in conflict with power lines in a standing or free falling situation? .....  YES  NO
6. Will any trees be cut which are in proximity of overhead wires? .....  YES  NO

**If you answered YES to any of the above questions,  
you must contact your local utility company.**

THE PROPERTY OWNER OR CONTRACTOR COULD HAVE PERSONAL LIABILITY IN THE EVENT OF INJURY OR FATALITY INVOLVING CONSTRUCTION CLOSE TO EDISON LINES.

THE PROPERTY OWNER OR CONTRACTOR MUST CONTACT MISS DIGG 1-800-482-7171 BEFORE EXCAVATING.

NORMAL LEAD TIME REQUIRED TO RELOCATE EDISON FACILITIES, OR PROVIDE A LINE EXTENSION IS SIX (6) WEEKS AFTER ALL RIGHT-OF-WAY OR OTHER AGREEMENTS AND ANY PAYMENTS HAVE BEEN FINALIZED WITH THE PROPERTY OWNER.

***The Detroit Edison Company maintains electric distribution facilities in this area.  
They will provide electric service subject to the rules of the Michigan Public  
Service Commission in effect at that time.***

**PROPERTY OWNER INFORMATION (please print)**

Property Owner Name \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_  
Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Owner Driver's License # \_\_\_\_\_ or Date of Birth \_\_\_\_\_

**PROPERTY OWNER AFFIDAVIT:** I hereby certify that the work described on this permit application shall be installed in accordance with the State Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for the necessary inspections.

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, prohibit a person from conspiring to circumvent the licensing requirements of the state relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACTOR / AGENT INFORMATION (please print)**

Contractor Name on License \_\_\_\_\_ Phone ( \_\_\_\_ ) \_\_\_\_\_  
Contractor State License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Federal I.D. Number (or reason for exemption) \_\_\_\_\_  
Workman's Comp. Carrier (or reason for exemption) \_\_\_\_\_  
Driver's License Number \_\_\_\_\_ Exp Date \_\_\_\_\_

**CONTRACTOR AFFIDAVIT:** I hereby certify that the proposed work is 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 and the local jurisdiction. All information 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, prohibit a person from conspiring to circumvent the licensing requirements of the state relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.

Contractor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**ESTIMATED COST OF CONSTRUCTION.....\$ \_\_\_\_\_**

Commercial Square Footage \_\_\_\_\_  
Occupancy Load \_\_\_\_\_  
Use Group \_\_\_\_\_ Construction Type \_\_\_\_\_

**FEE: \$100 PER INSPECTION**  
**\$100 HR - PLAN REVIEW**  
**PLAN REVIEWER \_\_\_\_\_**  
**APPROVED BY \_\_\_\_\_**

BLDG OFFICIAL

- **PERMITS ARE AVAILABLE AT THE TOWNSHIP HALL DURING REGULAR BUSINESS HOURS**

- **TO OBTAIN A BUILDING PERMIT YOU WILL NEED THE FOLLOWING:**

- A. CULVERT PERMIT/RIGHT-OF-WAY PERMIT:** Lapeer Co. Road Commission (810) 664-8323
- B. SEPTIC PERMIT** - Lapeer County Health Department (810) 667-0392
- C. WELL PERMIT** - Lapeer County Health Department (810) 667-0392
- D. SOIL EROSION PERMIT** (if applicable) Lapeer County Road Commission (810) 664-8323
- E. PROOF OF OWNERSHIP:** Land Contract, Warranty Deed, or Tax Receipt
- F. WET LAND PERMITS:** Contact MDEQ at (517) 625-4668

- **ALL OTHER PERMITS INCLUDING ADDRESS AND ZONING ARE AVAILABLE AT THE TOWNSHIP HALL.**

- **CONSTRUCTION DRAWING REQUIREMENTS:**

**COMMERCIAL/INDUSTRIAL:** 3 complete sets, with all Engineering, Specifications, Energy Calculations, Flood Plain "Bench" Elevation and Seal.

**SINGLE-FAMILY, MULTI-FAMILY, ADDITIONS, AND ACCESSORY BUILDINGS** - 2 complete sets of drawings, including the following:

- G. Floor Plan
- H. Elevation
- I. Cross Section
- J. Foundation Detail
- K. Footing Detail
- L. Engineering Print for all engineered wood products, Roof Trusses, Lam-Beams, etc.
- M. Engineering details for all Wood Foundations
- N. Fireplace cross-section for all Natural Fireplaces
- O. Energy Calculations sufficient to ensure compliance with the State Energy Code
- P. Flood Plain, Bench Elevation, if applicable

***The Building Department may require a minimum of 48 hours for the review of construction drawings, or for the review of both Building and/or Zoning***