

# RESIDENTIAL APPLICATION CHECKLIST (Return with Application)

Project address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

**\*Before a permit may be issued, ALL of the following documentation must be submitted or justified as non-applicable. Please indicate by checkmark that each item has been enclosed with the application.**

- \_\_\_\_\_ 1. \* ZONING APPROVAL - Land use from your Township
- \_\_\_\_\_ 2. LOT DIAGRAM (Required for ALL applications)
- \_\_\_\_\_ 3. BLUEPRINTS OR DRAWINGS - Provide (2 sets) of complete drawings. If over 3500 sq ft of habitable space, you will need signed and sealed plans by an Architect or Engineer.
- \_\_\_\_\_ 4. MICHIGAN UNIFORM ENERGY CODE COMPLIANCE – Provided in packet
- \_\_\_\_\_ 5. ROOF LOADING DATA SHEET — For all projects that inquire roofing
- \_\_\_\_\_ 6. PROOF OF OWNERSHIP ( Tax document, Deed, Title Insurance commitment )  
RECORDED DEED OR RECORDED LAND CONTRACT WILL BE REQUIRED FOR ALL NEW HOME CONSTRUCTION WHETHER STICK BUILT OR PREMANUFACTURED.
- \_\_\_\_\_ 7. PROPERTY TAX I.D. NUMBER ( Located on Tax bill ) \_\_\_\_\_
- \_\_\_\_\_ 8. WELL & SEPTIC SUPPLY PERMITS (County Health Department and/or Septic/water Authorities)
- \_\_\_\_\_ 9. DRIVEWAY/SIDEWALK PERMIT – (County Road Commission, MDOT, City or Village)
- \_\_\_\_\_ 10. Is the structure within 500 ft of water? ( Lake, River, Stream, County Drain ) OR is the excavated area equal to or great than 1 acre?  
YES / NO **If YES a SOIL EROSION PERMIT IS REQUIRED.**
- \_\_\_\_\_ 11. Is property located in Wetlands, Floodplain, River front or Critical dune area? YES / NO  
**No building permit may be issues if in a flood plain without EGLE\* and/or DNR\* approval.**
- \_\_\_\_\_ 12. OTHER PERMITS EVENTUALLY NECESSARY:

\_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_ Plumbing

## RESPONSIBILITIES OF APPLICANTS

It is the legal responsibility of the applicant to call for all required inspections or before any electrical, plumbing, mechanical, or structural work is concealed or covered. It is also the applicant's/ Contractor's responsibility to obtain and submit separate applications for any electrical, mechanical, plumbing or building permits.

BUILDING DEPT OFFICE HOURS: 8:00am to 12:00 & 1:00 to 5:00pm, Monday - Friday. PHONE at 231-882-9673; MAIL: 448 Court Place, Beulah, MI 49617; EMAIL: [Building@benzieco.net](mailto:Building@benzieco.net)

SIGN: \_\_\_\_\_

DATE: \_\_\_\_\_

Jurisdiction of: **BENZIE COUNTY**  
 Date: \_\_\_\_\_

## BUILDING PERMIT DETAIL

Department Approval By:  
 \_\_\_\_\_

**Permit No.** \_\_\_\_\_

Job Address: \_\_\_\_\_ Property Tax I.D.: \_\_\_\_\_

Zoning: \_\_\_\_\_ Homeowner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Type Of Construction: \_\_\_\_\_ Basic Dimensions \_\_\_\_\_ ft. X \_\_\_\_\_ ft. No. Of Floors \_\_\_\_\_

Contractor: \_\_\_\_\_ phone: \_\_\_\_\_

New Structure: _____ Addition: _____ Lean-to: _____ other: _____	
Sq. ft Main Floor _____	Sq. Ft 2nd Floor _____ Bldg. Height in ft. _____ Ceiling Height in Ft. _____
Sq. ft. Fin. Basement _____ Sq. ft Unfin. Basement _____	
Sq. ft. Porches _____	Sq. Ft. Breezeways _____ Sq. Ft. Wood Deck _____
Sq. Ft. Garage ( Attached Garage requires fire separation) _____	
Type Of Foundation: _____	Framing Type: _____
Exterior: _____ wood _____ Aluminum/Vinyl _____ Brick _____ Block	
Roof Type: _____	Insulation Type _____ No. Of Windows _____

Contractor		Phone	
Address		City	State
			Zip
Federal ID/Social No.		MESC Employer No.	
License No.	Exp Date	Worker's Disability Comp Carrier	
If Exempt from any of the above, Explain here:		Email:	

Permit Cost: \_\_\_\_\_

**HOME OWNER'S AFFIDAVIT & SIGNATURE:** I hereby certify that the work described above shall be installed in accordance with the local code & shall not be enclosed, covered up, or put into operation until it has been inspected & approved by the inspector. I will cooperate with the inspector & assume the responsibility to arrange for necessary & timely inspections.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**AGENT/CONTRACTOR'S AFFIDAVIT & SIGNATURE:** I hereby certify that the proposed work is authorized by the owner of record & I have been authorized by the owner to make this application as his authorized agent.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# LOT DIAGRAM

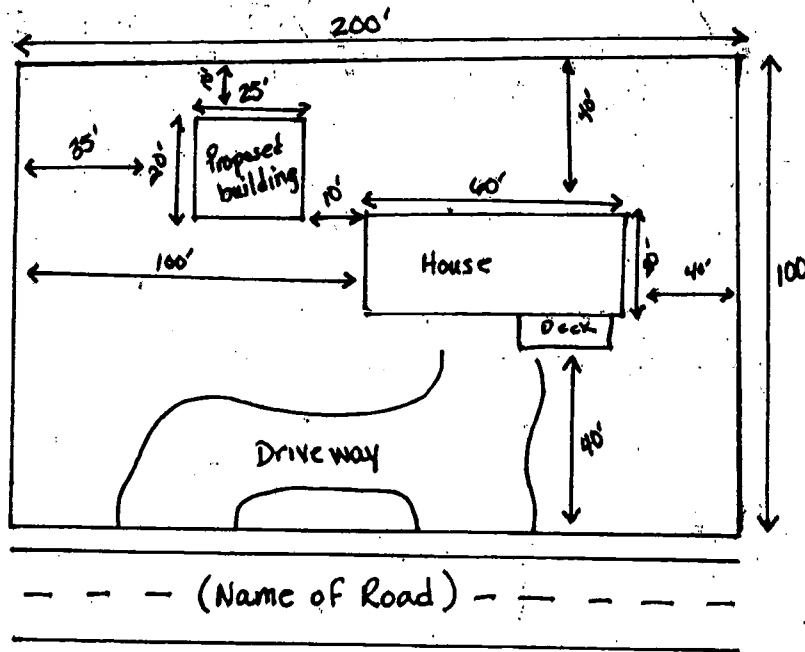
OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TAX I.D.: \_\_\_\_\_

- 1) Draw lot lines in feet
- 2) Label street
- 3) Draw existing structures
- 4) Draw proposed construction
- 5) Show dimensions of buildings
- 6) Show distance from all sides of buildings to property lines
- 7) Draw lakes, streams, & wetlands within 500 ft.
- 8) Contractor/Owner will stake 2 adjacent lot lines

Example  
Lot of a  
diagram →



# Benzie County Building Department

## MICHIGAN UNIFORM ENERGY CODE (MUEC) COMPLIANCE

\*Indicate & Provide documentation of one of the following methods that you will use for compliance of the MUEC.

- Res check. (available online) [www.enerycodes.gov/rescheck](http://www.enerycodes.gov/rescheck)  
Attach copy of completed compliance form
- US PA Energy Star House Program. Attach copy of completed compliance form
- Home Energy Rating System (HERS) with a score of 83 or better.
- Prescriptive method with minimum required insulation values per the MUEC that follows. Identify R & U values on the exterior components of home.

	REQUIRED:	PROPOSED:
• Window & Door area (Fenestration openings)	Maximum U-0.32; U _____	
• Sky Lights	Maximum U-0.55; U _____	
• Slab at Grade Floor (Walkout basement floors)	Minimum R-10; R _____	
• Basement Walls	Minimum R-15-19; R _____	
• Crawl Space Walls	Minimum R-15-19; R _____	
• Floors Over Unconditioned Space	Minimum R-30; R _____	
• Building Component Walls, Rim Joist etc.	Minimum R-20 or 13+5; R _____	
• Ceiling & Attic Spaces	Minimum R-49 R _____	

**Job Address:** \_\_\_\_\_  
NUMBER & STREET CITY

\_\_\_\_\_ TOWNSHIP STATE ZIP CODE

**Applicant's Name:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

\*DOCUMENTATION OF ONE OF THE COMPLIANCE OF MUEC METHODS SHALL BE PROVIDED BEFORE PERMIT APPROVAL IS GIVEN

## ROOF LOADING DATA SHEET

Authority: 1972 PA 230: Complete prior to application for plan review and building permit. This form is a voluntary form used to assist in the permit approval process.

Jurisdiction Information: **BENZIE COUNTY**  
**448 COURT PLACE**  
**BEULAH, MI 49617**

Applicant's Name:

Date:

Applicant's Address:

City: State: Zip:

Applicant's Signature:

Job Location:

Address:

Township/Village:

County: BENZIE COUNTY

**THIS FORM SHOULD BE COMPLETED BY THE PERMIT APPLICANT OR DESIGN PROFESSIONAL FOR C, C<sub>t</sub> AND I. PLACE AN "X" IN THE APPROPRIATE BOX THAT BEST DESCRIBES THE STRUCTURE.**

Ground Exposure,  $P_g = 60$  psf

From Figure R301.2 (5) MCR or MRC table R301.2(5)

### Exposure Factor C.

Exposure		Fully Exposed <sup>1</sup>		Partially Exposed <sup>2</sup>		Sheltered <sup>3</sup>	
A	Large city center with at least ½ the buildings exceeding 70 ft. in. height.	N/A		1.1		1.3	
B	Urban and suburban areas, wooded areas or other terrain with closely spaced objects having the size of single-family dwellings or larger.	0.9		1		1.2	
C	Open terrain with scattered obstructions having heights less than 30 ft. (flat open country)	0.9		1		N/A	
D	Flat unobstructed areas exposed to wind flowing over open water for a distance of at least 1 mile. (i.e. Great Lakes).	0.8		0.9		N/A	

1. Fully Exposed: Roofs exposed on all sides with no shelter by terrain, higher structures, or trees.
2. Partially Exposed: All roofs except those designated as "fully exposed" or "sheltered".
3. Sheltered: Roofs located tight among conifers that qualify as obstruction.

### Thermal Factor C<sub>t</sub>

Thermal Condition <sup>4</sup>	C <sub>t</sub>
All structures except as listed below.	1
Structures kept just above freezing and those with cold, ventilated roofs with an R-factor of 25 or greater between the ventilated and heated spaces, such as attics.	1.1
Unheated structures and those intentionally kept below freezing, such as seasonal building or storage buildings.	1.2
Continuously heated greenhouse with a roof R-Value less than 2 and having an interior temperature maintained at about 50° F 3 ft. above the floor during winter months and a temperature alarm system or an attendant to warn of a heating failure.	0.85

4. These conditions shall be representative of the anticipated conditions during winter months for the life of the structure.

### Importance Factor

Category	I
I Building and other structures representing low hazard to human life, i.e.: agricultural, Temporary and Minor Storage Facilities.	0.8
II All buildings except those listed in Categories III and IV.	1
III Building and other structures representing substantial hazard to human life in the event of failure.	1.1
IV Buildings and other structures designated as essential facilities.	1.2

### Active Live Load

Entire attic: Y/N

Specific Areas (If yes, list below) Y/N