

## 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 (3 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 greater 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?  
No building permit may be issues if in a flood plain without EGLE\* and/or DNR\* approval. OTHER YES/ NO
- ☐ 12. PER.NUTS 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@benzienco.net

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

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

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

# RESIDENTIAL BUILDING PERMIT

**Benzie County**  
BUILDING DEPARTMENT  
448 Court Place  
Beulah, MI 49617  
Phone 231-882-9673  
Fax 231-882-0033

Permit # \_\_\_\_\_  
New residential construction, addition, and alteration

Job Address: \_\_\_\_\_ Property Tax ID: \_\_\_\_\_

Zoning District: (office use) \_\_\_\_\_ Permit Determinant: (office use) \_\_\_\_\_

Use Group: (office use) \_\_\_\_\_ Owner: \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Type Const: \_\_\_\_\_ Address: \_\_\_\_\_

Basic Dimensions: \_\_\_\_\_ ft. x \_\_\_\_\_ ft. Contractor: \_\_\_\_\_ Phone( ) \_\_\_\_\_

No. Floors: \_\_\_\_\_ Address: \_\_\_\_\_

_____ Sq Ft main floor	_____ No. rooms 2 <sup>nd</sup> floor	_____ No. wood burners
_____ Sq Ft second floor	_____ No. full baths	_____ Sq Ft porches/breezeways
_____ Sq Ft fin. basement	_____ No. half baths	_____ Sq Ft deck
_____ Sq Ft unfinished basement	_____ No. fireplaces	_____ (Ft.) ceiling height
_____ No. rooms 1 <sup>st</sup> floor	_____ No. chimneys	_____ (Ft.) building height
_____ Sq Ft garage	_____ No. Bedrooms	

(attached garage requires fire separation)

Please supply 3 sets of plans If print is from an architect, please supply a digital copy

## PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

### FOUNDATIONS

\_\_\_\_\_ ftgs \_\_\_\_\_ X \_\_\_\_\_  
\_\_\_\_\_ " below fin grade  
\_\_\_\_\_ No. post footings  
\_\_\_\_\_ "X" "X" "  
\_\_\_\_\_ poured walls  
\_\_\_\_\_ H.C. block \_\_\_\_\_  
\_\_\_\_\_ Wood foundation  
\_\_\_\_\_ (provide diagram)  
\_\_\_\_\_ Ft foundation wall height  
\_\_\_\_\_ "Crawl space wall height  
\_\_\_\_\_ " Egress sill height  
\_\_\_\_\_ No. basement windows  
\_\_\_\_\_ Crawl space vent openings

### ROUGH-IN FRAMING

\_\_\_\_\_ Sill plate (treated)  
\_\_\_\_\_ Wall plates  
\_\_\_\_\_ Headers  
\_\_\_\_\_ Wood girder  
\_\_\_\_\_ Steel girder  
\_\_\_\_\_ Post \_\_\_\_\_ Ft. O .C.  
\_\_\_\_\_ Stud wall  
\_\_\_\_\_ Masonary  
\_\_\_\_\_ Floor joists \_\_\_\_\_ " O.C.  
\_\_\_\_\_ Ceiling joists \_\_\_\_\_ " O.C.  
\_\_\_\_\_ Rafters \_\_\_\_\_ " O.C.  
\_\_\_\_\_ Truss (diagram required)  
\_\_\_\_\_ " Floor sheathing  
\_\_\_\_\_ " Wall sheathing  
\_\_\_\_\_ " Roof sheathing  
\_\_\_\_\_ " Corner brace sheath

### EXTERIOR

\_\_\_\_\_ Wood  
\_\_\_\_\_ Aluminium/Vinyl  
\_\_\_\_\_ Brick  
\_\_\_\_\_ Block

### ROOFS

\_\_\_\_\_ Hip  
\_\_\_\_\_ Gable  
\_\_\_\_\_ Front overhang  
\_\_\_\_\_ Other overhang  
\_\_\_\_\_ Eaves trough  
\_\_\_\_\_ Asphalt shingles  
\_\_\_\_\_ Underlayment  
\_\_\_\_\_ Vents  
\_\_\_\_\_ Other coverings

### CHIMNEY TYPE

\_\_\_\_\_ Brick  
\_\_\_\_\_ Block  
\_\_\_\_\_ Stone  
\_\_\_\_\_ Metal

### WINDOWS

\_\_\_\_\_ No. of windows  
\_\_\_\_\_ Type \_\_\_\_\_  
\_\_\_\_\_ Egress/bedrooms  
\_\_\_\_\_ Attic access 22"x 30"

### INSULATION

\_\_\_\_\_ " Fiberglass  
\_\_\_\_\_ " Cellulose  
\_\_\_\_\_ "Blown in fiberglass  
\_\_\_\_\_ " Foam  
\_\_\_\_\_ other  
\_\_\_\_\_ "rigid poly ure.  
\_\_\_\_\_ "rigid styro  
\_\_\_\_\_ "insul sheath  
\_\_\_\_\_ wind barrier  
\_\_\_\_\_ (mil) moisture barrier

### Interior

\_\_\_\_\_ Foyer  
\_\_\_\_\_ Kitchen floor  
\_\_\_\_\_ Other floor  
\_\_\_\_\_ Drywall  
\_\_\_\_\_ Plaster  
\_\_\_\_\_ Covered ceiling  
\_\_\_\_\_ Panel wainscot  
\_\_\_\_\_ 5/8"garage fire code

### BUILT-IN ITEMS

\_\_\_\_\_ Oven  
\_\_\_\_\_ Range  
\_\_\_\_\_ Disposal  
\_\_\_\_\_ Hoods/fan  
\_\_\_\_\_ Dishwasher  
\_\_\_\_\_ Refrigerator  
\_\_\_\_\_ Vanities  
\_\_\_\_\_ Ft. Cupboard length

**Contractor will stake 2 adjacent lot lines for First Inspection.  
Sketch lot diagram on second page. Also sign permit.**

## PERMITS EVENTUALLY NEEDED FOR THIS PROJECT (trade permits are separate from the building permit)

### Electrical Permit

☐ yes ☐ no

### Mechanical Permit

☐ yes ☐ no

### Plumbing Permit

☐ yes ☐ no

**Make checks payable to:  
Benzie County**

**COST OF PERMIT \$** \_\_\_\_\_

By: \_\_\_\_\_  
Building Official

COMPLETE INFORMATION ON SECOND PAGE

# BUILDING PERMIT SECOND PAGE

## LOT DIAGRAM

Owner: \_\_\_\_\_ Job Address: \_\_\_\_\_

Address: \_\_\_\_\_

Tax I.D.: \_\_\_\_\_

- |                              |   |  |
|------------------------------|---|--|
| (1) Draw lot lines in feet   | (4) Draw proposed construction                            | (7) Draw lakes, streams, and wet lands within 500 feet |
| (2) Label street             | (5) Show dimensions of all buildings                      | (8) Contractor/owner will stake 2 adjacent lot lines   |
| (3) Draw existing structures | (6) Show distance from all sides of building to sidelines |  |

Engineer/Architect: \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_

**Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information**

Name		Phone Number (     )
E-mail address		Cell Phone Number (     )
Address:		City, State, Zip Code
Federal ID/Social Security No.		MESC Employer No.
License No.	Exp Date	Worker's Compensation Carrier
If exempt from any of the above, explain here:		

***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 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.***

### Homeowner's Affidavit and Signature

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, 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 necessary and timely inspections.

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

### Agent/Contractor's Affidavit and Signature

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

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

## 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 on.line) [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 PERMT APPROVAL IS GIVEN

# **ROOF LOADING DATA SHEET**

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

**Jurisdiction Infonnation:** 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 PROFMSIONAL FOR C., C AND I, PLACE AN "X" IN THE APPROPRIATE BOX THAT BEST DESCRIBES THE STRUCTURE,

**Ground Exposure,  $P_g = 60\text{psf}$**

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 ½the 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 Lak<=S),	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 Ct**

Thermal Condition	Ct
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 degrees 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 condition,, shall be representative ofthe anticipated condition,, during winter months for the life ofthe structure.

## **Importance Factor**

Category	I
I Building and other structures representing low huzerd to human life, i.e.: agricultural,Temporay and Minor Storage Facilities.	0.8
II All buildings except those listed in Categories mand 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**

**Entier attic: Y/N**

**Special areas ( If yes , list below ) Y/N**