

BOB HESS INSPECTIONS
56120 STOWELL ROAD
COLON, MI 49040

Ph. 269-432-2092

Mobile 269-268-4080

Fax 269-432-4440

Permit Application for: _____

Permit Application 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. Proof of ownership (provide copies of deed or land contract with tax number).
- _____ 2. Site plan or lot diagram on back of last page of the application. (required of **ALL** applications: new homes, additions and interior remodel). ** Site plan must show dimensions to all property lines from proposed building.
- _____ 3. Blue prints/drawing: wall section, foundation plan and floor plan required on **ALL** applications. Two (2) complete sets of drawings are required with any permit applications.
- _____ 4. Estimated cost of project. \$ _____
- _____ 5. Health department permit (Septic system).
- _____ 6. Driveway/sidewalk permit: Road commission or jurisdiction.
- _____ 7. Is the structure within 500 feet of water (lake, river, county drain)? []Yes []No. If yes, a soil erosion permit is required.
- _____ 8. Is property located in wetlands or floodplains? []Yes []No
- _____ 9. Zoning approval documentation
- _____ 10. Other permits eventually necessary:
 _____ Electrical _____ Mechanical _____ Plumbing _____ Sign

Applicant or licensed contractor must submit separate application forms for these permits prior to commencing work on that portion of the project.

RESPONSIBILITIES OF APPLICANTS

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

Permit Application Checklist

Applicant Signature: _____ Date: _____

Building Official Signature: _____ Date: _____

Blue prints and drawings must contain sufficient detail to perform a plan review for conformance with the state building code. Include wall section/cross section drawing showing material dimensions and specifications from footing to rafters, as well as, floor plan indicating all room dimensions, window, door and stair openings. All structures containing premanufactured members (roof trusses, floor trusses, etc.) require a sealed diagram from the manufacturer, forward to our office at time of delivery.

Sanitation Permit

Health Department
1110 Hill St.
Three Rivers, MI 49093
269-273-2161

OR _____

Driveway Permit

St. Joseph County Road Commission
20914 M-96
Centreville, MI 49032
269-467-6393

OR _____

Soil Erosion Permit

Soil Conservation District
693 East Main St.
Centreville, MI 49032
269-467-6336

Department of Natural Resources (Plainwell Office) 269-685-6851
Department of Natural Resources (Lansing Office) 517-373-3930

Please call should you require further assistance in completion applications:

Robert Hess
269-432-2092

NOTE: As of February 28, 2005 all Single and Multiple Family residences will be subject to the Michigan Uniform Energy Code.

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I. Location of building

Address: _____

City/Village: _____ Township: _____

County: _____ Zip Code: _____

II. Identification

A. Owner/Lessee

Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

B. Architect or Engineer

Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

License Number: _____ Expiration Date: _____

C. Contractor

Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

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: Place an [X] to indicate choice.

- 1. New building 2. Addition 3. Alteration 4. Repair 5. Wrecking
- 6. Mobile Home set-up 7. Foundation only 8. Premanufactured 9. Relocation

B. Review(s) to be performed

- Building Plumbing Mechanical Electrical Energy

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IV. Proposed use of building**A. Residential-** For “wrecking” show most recent use. Place an [X] to indicate choice.

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. Nonresidential - For “wrecking” show most recent use. Place an [X] to indicate choice.

7. [] Amusement 8. [] Church, Religious 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 _____

Nonresidential- Describe in detail proposed 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.** Place an [X] to indicate choice.

1. [] Masonry, Wall Bearing 2. [] Wood Frame 3. [] Structured Steel
4. [] Reinforced Concrete 5. [] Other _____

B. Principal Type of Heating Fuel. Place an [X] to indicate choice.

6. [] Gas 7. [] Oil 8. [] Electricity 9. [] Coal 10. [] Other _____

C. Type of Sewage Disposal. Place an [X] to indicate choice.

11. [] Public or Private Company 12. [] Septic System

D. Type of Water Supply. Place an [X] to indicate choice.

13. [] Public or Private Company 14. [] Private Well or Cistern

E. Type of Mechanical. Place an [X] to indicate choice.

15. [] Will there be air conditioning? [] Yes [] No
16. [] Will there be an elevator? [] Yes [] No

F. Dimensions

17. Number of stories _____

18. Floor Area 1st & 2nd floor _____ 3rd-10th floors _____ 11th – above floors _____

Total Area _____

Total Land Area (square feet) _____

G. Number of off street spaces

20. Enclosed _____ 21. Outdoors _____

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VI. Applicant Information

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

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Federal I.D. No./Social Security No. (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 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, 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 this 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.

Fee Enclosed \$ _____

Signature of Applicant _____ Application Date _____

VII. Local Government Agency to Complete This Section

Environmental Control Approvals

	Required?			Approved	Date	Number	By
	YES		NO				
A. Zoning							
B. Fire District							
C. Pollution Control							
D. Noise Control							
E. Soil Erosion							
F. Flood Zone							
G. Water Supply							
H. Septic System							
I. Variance Granted							
J. Other							

Notes and Date- For Department Use

VIII. Validation

Building Permit Number: _____

Approved by: _____

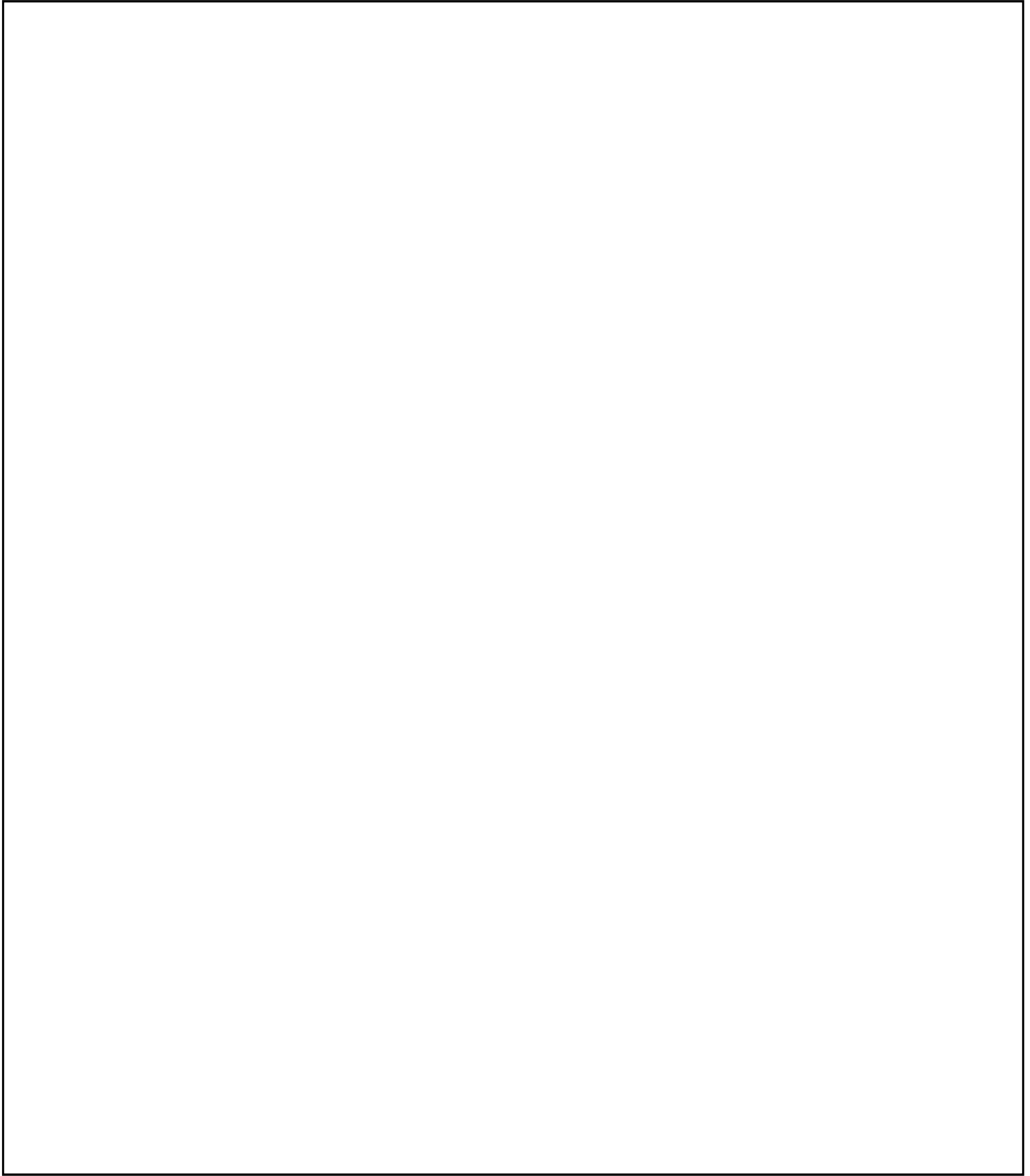
Issue Date: _____

Signature: _____

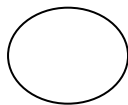
Permit Fee: _____

Title: _____

IX. Site or Plot Plan- For Applicant Use



Indicate direction of North within the circle:



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Schedule

<u>Colon Village Office</u> 132 N. Blackstone Ave. Colon, MI 49040 Ph. 269-432-2532 <i>1st & 3rd Tuesday of Month</i> <i>9:00-10:00 A.M.</i>	<u>Sturgis Township</u> 26015 W. U.S. 12 Sturgis, MI 49091 Ph. 269-651-3676 <i>2nd & 4th Tuesday of Month</i> <i>9:00-10:00 A.M.</i>
<u>Mendon Township</u> 136 W. Main St. Mendon, MI 49072 Ph. 269-496-7708 <i>2nd & 4th Wednesday of Month</i> <i>9:00-10:00 A.M.</i>	<u>Nottawa Township</u> 221 W. Main St. Centreville, MI 49032 Ph. 269-467-7835 <i>Monday & Thursday</i> <i>9:00-10:00 A.M.</i>

After Zoning Inspection request has been approved, building permits can be obtained from any of the above offices.