

City of Marine City Building Department 260 S. Parker St Marine City, MI 48039 (810) 765-9011 buildingdepartment@cityofmarinecity.org

Building Permit Application

Authority:1972 PA230Completion:Mandatory to obtain permitPenalty:Permit cannot be issued

Residential Structures

(One-and Two-Family Residential with less than 3,500 square feet of calculated floor area)

Building Permit Application (BCC-324).
Minimum of two (2) sets of plans that include the following: Foundation and floor plans Roof and wall section Building elevations Site plan Provide method of compliance with the "Michigan Uniform Energy Code"

Commercial Structures

(Including One and Two-Family Structures with more than 3,500 square feet of calculated floor area)

Building Permit Application (BCC-324)Copy of plan review approval letter. Building plan review must be approved prior to a building permit being issued.

Mobile and Premanufactured Homes

•Building Permit Application (BCC-324)

•Minimum of two (2) sets of plans for the foundation and the method of anchoring the unit to the foundation for Mobile Homes

•Site plan

•For Michigan approved premanufactured units; one (1) copy of the Building System Approval and the approved plans.

Demolition of Structures

•Building Permit Application (BCC-324)

•DEQ/LARA Notification of Intent Renovate/Demolish form (EQP 5661) (MIOSHA-CSH 142) •Proof of Utility Disconnects (electrical, water, gas)

Instructions for Completing Application

Page 1 of the application: Complete all applicable sections. Note section II(C, D). If the owner is doing the construction, enter "Owner" in the contractor information space. The application must be signed by the owner and the applicant. (If the applicant is the owner, only sign the application on the "Signature of Owner" line.

Page 2 of the application: Enter the information as required. (Type of improvement, use of structure, type of construction and Dimensions/Data)

Page 3 Environmental Control Approvals - This section must be completed by the local governmental agency (city/township etc.) for environmental control approvals (be sure that all local requirements A through I are approved). In certain jurisdictions, a land use permit may be substituted for zoning approval. Indicate whether a well or septic approval is required. Well and septic permits are typically issued by the county health department.

Schools: It is the responsibility of public schools to submit for environmental control approvals as required by law.

Building Permit Fees

Building permit fees may be obtained from the Building Department, which can be reached at (810) 765-9011

You will need to furnish the following information when calling

•Total square footage of the structure.

•Use group (i.e., "R-3"use group for single family homes, "U" use group for detached garages, pole barns, etc.). •Type of construction ("5B" for wood frame construction is typical for a residence, or "2B" construction oncombustible construction is typical for a school).

If you submit your building permit application and plans without money, your application will be put on hold and you will receive an invoice for the building permit fee.

When to Call for an Inspections

Please call the building inspector's telephone number listed on your building permit at least two (2) days prior to the time you need an inspection. A minimum of five (5) inspections are required on most structures. It is the <u>permit holder's</u> responsibility to call for inspections, prior to the construction being covered.

Foundation Inspection

Prior to placing concrete in piers, trenches and formwork.

Backfill Inspection

Prior to backfill and after the footings, walls, waterproofing, and drain tile are installed.

Rough Inspection

The rough inspection is to be made after the roof, all framing, firestopping, bracing, and the electrical rough, mechanical rough, and the plumbing rough installations have been approved and before the insulation is installed.

Insulation Inspection

The insulation inspection is conducted after all insulation has been installed and before any finish work is installed.

Final Inspection

The final inspection is to be made upon completion of the building or structure, and before occupancy occurs.

Expiration of Permit

A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$100.00.

Certificate of Occupancy

A new building or a building that is altered shall not be used or occupied until a Certificate of Occupancy is issued by the code official. The permit holder or their authorized agent must request a Certificate of Occupancy (in writing) upon the completion of the project. This request must include the building, electrical, mechanical, plumbing, boiler and elevator permit numbers (when applicable), the plan review submission number and the Bureau of Fire Services project number (for schools only). <u>A Certificate of Occupancy cannot be issued until all fees are paid, permits are finaled and the work covered by a building permit has been completed in accordance with the permit, the code and other applicable laws and ordinances. If an electrical, mechanical, plumbing, boiler or elevator permit, plan review submission or Fire Services project is not required, write "not applicable" on the request form in the appropriate space.</u>



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Building	Permit
Appl	ication

Authority: Completion: Man Penalty: F

1972 PA230 Mandatory to obtain permit Permit cannot be issued

Authority: Penalty:	1972 PA 230 Failure to provide the information	on may result in d	enial of your request		Marine City is an equal opportunity employer/program. Auxiliary services and other reasonable ations are available upon request to individuals with disabilities.										
	or Facility Information		eniar or your request.												
	DESCRIPTION			ADD	RESS										
NAME OF	CITY, VILLAGE OR TOWNSHIP	P IN WHICH JOB	IS LOCATED			CITY			ZIP CODE						
City	y 🔲 Village 🔲 Towr	nship OF:													
COUNTY		BETWEEN				AN	D								
Applica	ant														
NAME				E-MAIL											
ADDRESS	6		CITY		STAT	E	ZIP CODE	TELEPHONE NU	MBER (Include Area Code)						
Owner															
NAME					ADD	RESS									
								1							
CITY			STATE		ZIP C	ODE		TELEPHONE NU	MBER (Include Area Code)						
Signatu	ire														
OWNEF		CATION AS H	IS/HER AUTHORIZE	ED AGENT, AN	ND WE AG	REE TO C	CONFORM TO	ALL APPLICAB	EEN AUTHORIZED BY THE LE LAWS OF THE STATE OF						
	Section 23a of the st circumvent the licens residential structure.	sing requirer	nents of this state	e relating to p	ersons w	CL 125.1 who are to	523a, prohibit o perform wor	s a person fro k on a resider	om conspiring to itial building or a						
SIGNATU	RE OF OWNER (Required)				TYPE OR PRINT										
SIGNATU	RE OF OWNER'S AGENT				TYPE OR PRINT										
COST OF	CONSTRUCTION \$_			ľ	OR STATE ACCOUNT NUMBER										
Validati	ion - For Department Us	se Only			VALIDATION AREA										
USE G	ROUP														
TYPE C	OF CONSTRUCTION														
SQUAR	E FEET														
APPLIC	ATION FEE (non-refund	able) \$													
CERTIF	FICATE OF OCCUPANC	Y 🗆 YES [□ NO \$												
NUMBE	R OF INSPECTIONS		\$												
TOTAL	PERMIT FEE \$														
APPRO	VAL SIGNATURE														

Architect or Engineer												
NAME			ADDRESS	ADDRESS								
CITY		STATE	ZIP CODE	TELEPHONE	E NUMBER (Include Area Code)							
LICENSE NUMBER				EXPIRATION	N DATE							
Contractor												
NAME			ADDRESS									
CITY		STATE	ZIP CODE	TELEPHONE	E NUMBER (Include Area Code)							
			2 0002									
BUILDERS LICENSE NUM	RER			EXPIRATION								
BOILDERS LICENSE NOW	DER			EXPIRATIO								
		ation)			even tion)							
I EDERAL EMPLOYER ID	NUMBER (or reason for exemp	ouony		ANCE CARRIER (or reason for	елепіршоп)							
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UNEMPLOYMENT INSUR	ANCE AGENCY EMPLOYER	ACCOUNT NUMBER (or reason for exemp	tion)									
Type of Job												
A. Type of Improve	ment											
			F/	OUNDATION ONLY	RELOCATION							
				REMANUFACTURE								
	<u> </u>			-								
B. Plan Review Rec	•		melt and a dist	has the hashed of the	de se se de se se la complete							
determined based or	n the description in the				·							
Construction docume	ents must be sealed and	d signed by an architect or profes	sional engineer in ac	ccordance with 1980, PA	299 as amended. The seal							
	ired for one and two fa	mily dwellings less than 3,500 sc	uare feet of calculate	ed floor area and public	works less than \$15,000 in							
total construction cost.												
construction cost.												
		Building Code, a set of constr nd approved before a building			h a separate Application for							
	ine appropriate ree, a	na approved before a building	permit can be issu	eu.								
Plan Review Inform												
A. Residential - Bui	Idings Regulated by f	he Michigan Residential Code										
ONE FAMILY		TOWNHOUSE- N	No. of Units		CHED GARAGE							
				_								
	IILY	ATTACHED GAR	AGE	Ц отн	ER							
NO. OF UNITS												
B. Buildings Regul	ated by the Michigan	Building Code										
(A-1) ASSEMBLY (TH		(H-1) HIGH HAZARD (E	,	(M) MERCANT	ILE							
(A-2) ASSEMBLY (RE	STAURANTS, BARS, ETC.)	(H-2) HIGH HAZARD (D	EFLAGRATION)		TIAL 1 (HOTELS, MOTELS)							
	URCHES, LIBRARIES, ETC.)				TIAL 2 (MULTIPLE FAMILY)							
(A-4) ASSEMBLY (IND		(H-4) HIGH HAZARD (TIAL 3 (CHILD & ADULT CARE)							
	TDOOR SPORTS, ETC.)	(H-5) HIGH HAZARD (H			TIAL 4 (ASSISTED LIVING)							
(B) BUSINESS		(I-1) INSTITUTIONAL 1		_	E 1 (MODERATE HAZARD)							
(E) EDUCATION		(I-2) INSTITUTIONAL 2			E 2 (LOW HAZARD)							
(F-1) FACTORY (MOD		(I-3) INSTITUTIONAL 3		U) UTILITY (I	MISCELLANEOUS)							
(F-2) FACTORY (LOW	HAZARD)	(I-4) INSTITUTIONAL 4	(DAY CARE ETC.)									
Alteration, renairs	and additions - Provid	le a description of the work to be	covered by the build	ding permit. As example	s: 20.000 square foot school							
		school addition, replace 5 exterio										
5.	•	•										

BCC-324 (10/16) Page 2

Building Data

A. Type of Mechanical											
WILL THERE BE FIRE SUPPRESSION?											
B. Type of Construction											
IA - Non Combustible (Protected Structural Elements) 3HR IB - Non Combustible (Rated Structural Elements) 2HR 2A - Non Combustible (Rated Structural Elements) 2B - Non Combustible (Non Rated Structural Elements) 3A - Non Combustibles (Exterior Walls Only) 3B - Non Combustible (Bearing Walls Rated) 4 - Heavy Timber 5A - Combustible (Structural Elements Rated) 1HR 5B - Combustible (All Elements Not Rated)											
C. Dimensions / Data											
FLOOR AREA: EXISTING	ALT	ERATIONS	NEW								
BASEMENT											
1ST & 2ND FLOOR											
3RD - 10TH FLOOR											
11TH - ABOVE											
TOTAL AREA											
D. Number of Off Street Parking	g Spaces										
ENCLOSED		OUTDOOR	?S								
Local Governmental Agency to	Complete This Section	n									
ENVIRONMENTAL CONTROL APPROVALS											
	REQUIRED?	APPROVED	DATE	NUMBER	ВҮ						
A - Zoning	🗆 Yes 🛛 No										
B - Fire District	🗆 Yes 🛛 No										
C - Pollution Control	🗆 Yes 🛛 No										
D - Noise Control	🗆 Yes 🛛 No										
E - Soil Erosion	🗆 Yes 🗌 No										
F - Flood Zone	🗆 Yes 🛛 No										
G - Water Supply	🗆 Yes 🗌 No										
H - Sewer	🗆 Yes 🗆 No										
I - Variance Granted	🗆 Yes 🛛 No										
J - Other	🗆 Yes 🛛 No										

ALL APPLICATIONS MUST INCLUDE COPY OF:

- Builder's License
- Certificate of Liability Insurance
- Copy of Workman's Comp Insurance, if applicable
- Driver's License of builder or company Affidavit of Authorization

IX.	X. Site or Plot Plan - For Applicant Use																												
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Contractor Registration

Electrical Fee: \$25.00 Mechanical Fee: \$25.00 Plumbing Fee: \$25.00 Residential Contractor Fee: \$25.00

Date:	
Licensee Name:	Licensee Phone:
License Number:	Fed Tax ID:
Business Name:	
Business Address:	
Business Phone:	Business Email:
Qualifying Officer:	
Registration Applicant:	
Workers Comp Insurance Carrier (or reason for exemp	otion):
MESC Employer No. (or reason for exemption):	
Comments:	
Only the following persons will be allowed to obtain p	permits:
Signature:	Print Name:
Signature:	Print Name: