



Village of Birch Run
 12060 Heath Street
 Birch Run, MI 48415
 Office (989) 624-5711 Fax (989) 624-9681

APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

AUTHORITY: P.A. 230 of 1972, AS AMENDED COMPLETION: MANDATORY TO OBTAIN PERMIT PENALTY: PERMIT WILL NOT BE ISSUED	THE VILLAGE WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP OR POLITICAL BELIEFS.
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**APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V, & VI
 NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED
 FOR PLUMBING, MECHANICAL AND ELECTRICAL WORK PERMITS**

I. PROJECT INFORMATION				
PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND		
II. IDENTIFICATION				
A. OWNER OR LESSEE				
NAME		ADDRESS		
CITY	STATE	ZIP CODE		TELEPHONE NUMBER
B. ARCHITECT OR ENGINEER				
NAME		ADDRESS		
CITY	STATE	ZIP CODE		TELEPHONE NUMBER
LICENSE NUMBER				EXPIRATION DATE
C. CONTRACTOR				
NAME		ADDRESS		
CITY	STATE	ZIP CODE		TELEPHONE NUMBER
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				
1. ___ New Building	3. ___ Alterations	5. ___ Demolition	7. ___ Foundation Only	9. ___ Relocation
2. ___ Addition	4. ___ Repair	6. ___ Mobile Home Set Up	8. ___ Premanufacture	10. ___ Special Inspection
B. REVIEW(S) TO BE PERFORMED				
_____ Building	_____ Electrical	_____ Plumbing	_____ Mechanical	_____ Foundation
IV. PROPOSED USE OF BUILDING				
A. RESIDENTIAL				
1. _____ One Family	3. _____ Hotel, Motel _____ No. of Units	5. _____ Detached Garage		
2. _____ Two or More Family _____ No. of Units	4. _____ Attached Garage	6. _____ Other _____		

B. NON-RESIDENTIAL		
7. <input type="checkbox"/> Amusement	11. <input type="checkbox"/> Service Station	15. <input type="checkbox"/> School, Library, Educational
8. <input type="checkbox"/> Church, Religion	12. <input type="checkbox"/> Hospital, Institutional	16. <input type="checkbox"/> Store, Mercantile
9. <input type="checkbox"/> Industrial	13. <input type="checkbox"/> Office, Bank, Professional	17. <input type="checkbox"/> Tanks, Towers
10. <input type="checkbox"/> Parking Garage	14. <input type="checkbox"/> Public Utility	18. <input type="checkbox"/> 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		
1. <input type="checkbox"/> Masonry, Wall Bearing	2. <input type="checkbox"/> Wood Frame	3. <input type="checkbox"/> Structural Steel
4. <input type="checkbox"/> Reinforced Concrete	5. <input type="checkbox"/> Other _____	

B. PRINCIPAL TYPE OF HEATING FUEL		
6. <input type="checkbox"/> Gas	7. <input type="checkbox"/> Oil	8. <input type="checkbox"/> Electricity
9. <input type="checkbox"/> Coal	10. <input type="checkbox"/> Other _____	

C. TYPE OF SEWAGE DISPOSAL	
11. <input type="checkbox"/> Public or Private Company	12. <input type="checkbox"/> Septic System

D. TYPE OF WATER SUPPLY	
13. <input type="checkbox"/> Public or Private Company	14. <input type="checkbox"/> Private Well or Cistern

E. TYPE OF MECHANICAL	
15. Will There Be Air Conditioning <input type="checkbox"/> yes <input type="checkbox"/> no	16. Will There Be Fire Supression <input type="checkbox"/> yes <input type="checkbox"/> no

F. DIMENSIONS/DATA				
17. Number of Stories _____	21. Floor Area	<u>Existing</u>	<u>Alterations</u>	<u>New</u>
18. Use Group _____	Basement	_____	_____	_____
19. Const Type _____	1st & 2nd Floor	_____	_____	_____
20. No. of Occupants _____	3rd-10th Floor	_____	_____	_____
	11th above	_____	_____	_____
	Total Area	_____	_____	_____

G. NUMBER OF OFF STREET PARKING SPACES	
22. ENCLOSED _____	23. OUTDOORS _____

VI. APPLICANT INFORMATION				
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION				
NAME		TELEPHONE NUMBER		
ADDRESS	CITY	STATE		ZIP
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER				

I HEARBY 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/HER 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, 1972 PA 230, MCL 125.1523A, 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 subjected to civil fines.

SIGNATURE OF APPLICANT _____

PLAN REVIEW FEE ENCLOSED \$ _____

BUILDING PERMIT FEE ENCLOSED \$ _____ Make Checks Payable to "Village of Birch Run"

VII. CALCULATION OF PERMIT COST

The total cost of the improvement provides for the basis for the fee schedules. The cost of the improvement will be based on the latest version of the ICC's Building Valuation Data Table and will be calculated for you at the time you submit this application. In addition, the applicant may be required to provide a copy of a signed contract to verify the cost of the project. Pre-manufactured unit fees are based on 50% of the normal on-site construction permit fees.

When submittal documents are required by the MI Building Code (Current Edition), a plan review fee shall be paid at the time of submitting the said documents for plan review. Said plan review fee shall be sixty-five percent (65%) of the building permit fee as shown below. The plan review fees specified in this section are separate fees from the permit fees specified in said code and are in addition to the permit fees. When submittal documents are incomplete or changed so as to require additional plan review or when the project involves deferred submittal items as defined in said code, the Building Official has the authority to charge a \$47.00 per hour fee (or the total hourly cost to the jurisdiction, whichever is greatest) for plan review submittals which exceed the 1st review per trade.

Contractor Registration Fee \$15.00

The below listed fee schedule can be used for remodels/alterations, subject to approval by the building official. (1)

\$1.00 to \$500.00.....	\$50.00
\$501.00 to \$2,000.00.....	\$50.00 for the first \$500.00 plus \$6.00 for each additional \$100.00 or fraction thereof, to and including \$2,000.00
\$2,001.00 to \$25,000.00.....	\$140.00 for the first \$2,000.00 plus \$15.00 for each additional \$1,000.00, or fraction thereof, to and including \$25,000.00
\$25,001.00 to \$50,000.00.....	\$485.00 for the first \$25,000.00 plus \$10.50 for each additional \$1,000.00, or fraction thereof, to and including \$50,000.00
\$50,001.00 to \$100,000.00.....	\$747.50 for the first \$50,000.00 plus \$7.50 for each additional \$1,000.00, or fraction thereof, to and including \$100,000.00
\$100,001.00 to \$500,000.00.....	\$1,122.50 for the first \$100,000.00 plus \$6.00 for each additional \$1,000.00, or fraction thereof, to and including \$500,000.00
\$500,001.00 to \$1,000,000.00.....	\$3,522.50 for the first \$500,000.00 plus \$5.00 for each additional \$1,000.00, or fraction thereof, to and including \$1,000,000.00
\$1,000,001.00 and up.....	\$6,022.50 for the first \$1,000,000.00 plus \$4.00 for each additional \$1,000.00, or fraction thereof.

Other Inspections and Fees:

- 1. Inspections outside of normal business hours (minimum charge-two hours) \$100.00 per hour*
- 2. Reinspection fees assessed under provisions of Section 305.8 \$100.00 per inspection*
- 3. Inspections for which no fee is specifically indicated (minimum charge-1/2 hour)..... \$100.00 per hour*
- 4. Additional plan review required by changes, additions or revisions to plans (minimum charge-1/2 hour)..... \$100.00 per hour*
- 5. For use of outside consultants for plan checking and inspections, or both..... Actual costs**

* Or the total hourly cost to the jurisdiction, whichever is greatest. This cost shall include supervision, overhead, equipment, hourly wages and fringe benefits of the employee involved.

** Actual costs include administrative and overhead costs.

COST OF CONSTRUCTION: \$ _____

VIII. LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS					
Plans are enclosed with this application	Required?	Approved	Date	Number	By
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. SEPTIC SYSTEM	yes ___ no ___				
I. VARIANCE GRANTED	yes ___ no ___				
J. OTHER	yes ___ no ___				

IX. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP _____ CODE EDITION _____

TYPE OF CONSTRUCTION _____ SPRINKLER SYSTEM _____

APPROVAL SIGNATURE _____

TITLE _____ DATE _____