

**IMLAY TOWNSHIP**  
**682 North Fairgrounds Road**  
**Imlay City, MI 48444**  
**810-724-8835**

Authority: 1972 PA 230  
 Completion: Mandatory to obtain permit  
 Penalty: Permit will not be issued

Applicant to Complete All Items in Sections I, II, III, IV, V and VI

Note: Separate Applications Must Be Completed for Plumbing, Mechanical, and Electrical Work Permits

<b>I. PROJECT INFORMATION</b>				
PROJECT NAME		ADDRESS		
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED			COUNTY	ZIP CODE
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township    OF:				
BETWEEN		AND		
<b>II. IDENTIFICATION</b>				
<b>A. OWNER OR LESSEE</b>				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)	
<b>B. ARCHITECT OR ENGINEER</b>				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)	
LICENSE NUMBER			EXPIRATION DATE	
<b>C. CONTRACTOR</b>				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area 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				
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>				
<b>A. TYPE OF IMPROVEMENT</b>		<b>COST OF IMPROVEMENT \$ _____</b>		
1. <input type="checkbox"/> NEW BUILDING	3. <input type="checkbox"/> ALTERATION	5. <input type="checkbox"/> DEMOLITION	7. <input type="checkbox"/> FOUNDATION ONLY	9. <input type="checkbox"/> RELOCATION
2. <input type="checkbox"/> ADDITION	4. <input type="checkbox"/> REPAIR	6. <input type="checkbox"/> MOBILE HOME SET-UP	8. <input type="checkbox"/> PREMANUFACTURE	10. <input type="checkbox"/> SPECIAL INSPECTION
<b>B. PLAN REVIEW REQUIRED</b>				
Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, except as listed below.				
Plans are not required for alterations and repair work determined by the building official to be of a minor nature.				
Plans and specifications are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.				
Plan Review Submission No. _____				



IV. PROPOSED USE OF BUILDING																																
A. RESIDENTIAL																																
1. <input type="checkbox"/> ONE FAMILY	3. <input type="checkbox"/> HOTEL, MOTEL NO. OF UNITS _____	5. <input type="checkbox"/> DETACHED GARAGE																														
2. <input type="checkbox"/> TWO OR MORE FAMILY NO. OF UNITS _____	4. <input type="checkbox"/> ATTACHED GARAGE	6. <input type="checkbox"/> 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 SUPPRESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO																														
F. DIMENSIONS/DATA																																
17. NUMBER OF STORIES _____	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 40%;"></th> <th style="width: 20%;">EXISTING</th> <th style="width: 20%;">ALTERATIONS</th> <th style="width: 20%;">NEW</th> </tr> <tr> <td style="vertical-align: top; padding: 5px;">21. FLOOR AREA:</td> <td></td> <td></td> <td></td> </tr> <tr> <td style="padding-left: 20px;">BASEMENT</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td style="padding-left: 20px;">1ST &amp; 2ND FLOOR</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td style="padding-left: 20px;">3RD - 10TH FLOOR</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td style="padding-left: 20px;">11TH - ABOVE</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td style="padding-left: 20px;">TOTAL AREA</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </table>					EXISTING	ALTERATIONS	NEW	21. FLOOR AREA:				BASEMENT	_____	_____	_____	1ST & 2ND FLOOR	_____	_____	_____	3RD - 10TH FLOOR	_____	_____	_____	11TH - ABOVE	_____	_____	_____	TOTAL AREA	_____	_____	_____
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TOTAL AREA	_____	_____	_____																													
18. USE GROUP _____																																
19. CONSTRUCTION TYPE _____																																
20. NO. OF OCCUPANTS _____																																
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		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)

FEDERAL EMPLOYER ID NUMBER (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/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

DATE

# VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

## ENVIRONMENTAL CONTROL APPROVALS

	REQUIRED?	APPROVED	DATE	NUMBER	BY
A - ZONING	<input type="checkbox"/> YES <input type="checkbox"/> NO				
B - FIRE DISTRICT	<input type="checkbox"/> YES <input type="checkbox"/> NO				
C - POLLUTION CONTROL	<input type="checkbox"/> YES <input type="checkbox"/> NO				
D - NOISE CONTROL	<input type="checkbox"/> YES <input type="checkbox"/> NO				
E - SOIL EROSION	<input type="checkbox"/> YES <input type="checkbox"/> NO				
F - FLOOD ZONE	<input type="checkbox"/> YES <input type="checkbox"/> NO				
G - WATER SUPPLY	<input type="checkbox"/> YES <input type="checkbox"/> NO				
H - SEPTIC SYSTEM	<input type="checkbox"/> YES <input type="checkbox"/> NO				
I - VARIANCE GRANTED	<input type="checkbox"/> YES <input type="checkbox"/> NO				
J - OTHER	<input type="checkbox"/> YES <input type="checkbox"/> NO				

# VII. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP _____	PERMIT FEE _____
TYPE OF CONSTRUCTION _____	PLAN REVIEW _____
SQUARE FEET _____	TOTAL _____
APPROVAL SIGNATURE _____	
TITLE _____	DATE _____



IX. SITE OR PLOT PLAN - FOR APPLICANT USE

A large grid of graph paper, consisting of 30 columns and 30 rows of small squares, intended for drawing a site or plot plan.

The Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.