

# APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

**CHECK FOR ANY DEED RESTRICTIONS  
APPLICABLE TO THIS PROPERTY  
AND/OR THIS CONSTRUCTION**

**LIBERTY TOWNSHIP**  
101 W. Liberty Rd  
Clark Lake, MI 49234  
(517) 529-4374

PERMIT # \_\_\_\_\_

AUTHORITY: P.A. 230 OF 1972, as amended  COMPLETION: MANDATORY TO OBTAIN PERMIT  PENALTY: Application must be completed, signed and proper fee enclosed or permit will not be issued	THE LIBERTY TOWNSHIP 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 SECTIONS I, II, III, IV, V and VI**  
**NOTE: Separate applications must be made to the appropriate division for Plumbing, Mechanical and Electrical work permits**

<b>I. LOCATION OF BUILDING</b>			
ADDRESS			
CITY/VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND	
<b>II. IDENTIFICATION</b>			
<b>A. OWNER OR LESSEE</b>			
NAME		TELEPHONE NO	
ADDRESS	CITY	STATE	ZIP CODE
<b>B. ARCHITECT OR ENGINEER</b>			
NAME		TELEPHONE NO	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NO		EXPIRATION DATE	
<b>C. CONTRACTOR</b>			
NAME		TELEPHONE NO	
ADDRESS	CITY	STATE	ZIP CODE
BUILDERS LICENSE NO		EXPIRATION DATE	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION			
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION			
		/ Policy No.	/ Expiration Date
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>			
<b>A. TYPE OF IMPROVEMENT</b>			
1. <input type="checkbox"/> New Building	2. <input type="checkbox"/> Addition	3. <input type="checkbox"/> Alterations	4. <input type="checkbox"/> Repair
5. <input type="checkbox"/> Wrecking	6. <input type="checkbox"/> Mobile Home Set-up	7. <input type="checkbox"/> Foundation Only	8. <input type="checkbox"/> Premanufacture
9. <input type="checkbox"/> Relocation			
<b>B. REVIEW(S) TO BE PERFORMED</b>			
<input type="checkbox"/> Building	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Electrical
<input type="checkbox"/> Energy			

**IV. PROPOSED USE OF BUILDING****A. RESIDENTIAL - For "wrecking" show most recent use**

- |  |   |   |
|--|---|---|
| 14. <input type="checkbox"/> One Family      | 15. <input type="checkbox"/> Two or More Family<br>(no. of units _____) | 16. <input type="checkbox"/> Hotel, Motel<br>(no. of units _____) |
| 17. <input type="checkbox"/> Attached Garage | 18. <input type="checkbox"/> Detached Garage                            | 19. <input type="checkbox"/> Other                                |

**B. NON-RESIDENTIAL - For "wrecking" show most recent use**

- |   |  |   |
|---|--|---|
| 20. <input type="checkbox"/> Amusement                  | 21. <input type="checkbox"/> Church, Religious | 22. <input type="checkbox"/> Industrial                   |
| 23. <input type="checkbox"/> Parking Garage             | 24. <input type="checkbox"/> Service Station   | 25. <input type="checkbox"/> Hospital, Institutional      |
| 26. <input type="checkbox"/> Office, Bank, Professional | 27. <input type="checkbox"/> Public Utility    | 28. <input type="checkbox"/> School, Library, Educational |
| 29. <input type="checkbox"/> Store, Mercantile          | 30. <input type="checkbox"/> Tanks, Towers     | 31. <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.

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**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"/> Structured 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. <input type="checkbox"/> Will there be air conditioning <input type="checkbox"/> yes <input type="checkbox"/> no | 15. Will there be an elevator <input type="checkbox"/> yes <input type="checkbox"/> no |
|--|--|

**F. DIMENSIONS**

- |                             |   |
|-----------------------------|---|
| 17. Number of stories _____ | 18. Floor Area: 1 <sup>st</sup> & 2 <sup>nd</sup> Floor _____ |
| Estimated Cost: _____       |   |
| Total Area _____            | 19. Total Land Area (square feet) _____                       |

**G. NUMBER OF OFF STREET PARKING SPACES**

- |                    |                    |
|--------------------|--------------------|
| 20. Enclosed _____ | 21. Outdoors _____ |
|--------------------|--------------------|

**VI. APPLICANT INFORMATION**

**WARNING NOTICE**

**NO OCCUPANCY PERMITS WILL BE ISSUED OR PERSONS ALLOWED TO MOVE ON THE PREMISES UNTIL FINAL APPROVAL HAS BEEN RECEIVED FOR ALL BUILDING, MECHANICAL, PLUMBING AND/OR ELECTRICAL WORK PERFORMED ON THE PREMISES, IN ADDTION TO ZONING AND DEPT. OF PUBLIC WORKS APPROVAL.**

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

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 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.

<b>FEE ENCLOSED \$</b>	<b>OR STATE ACCOUNT NO.</b>
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<b>SIGNATURE OF APPLICANT</b>	<b>APPLICATION DATE</b>
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**VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION**

<b>ENVIRONMENTAL CONTROL</b>	<b>APPROVALS</b>
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	REQUIRED	APPROVED	DATE	NUMBER	BY
<b>A - Zoning/District</b>	( ) YES ( ) NO				
1. Site Plan Approval 2. Variance granted/Z.B.A .Approval	( ) YES ( ) NO				
<b>B - Fire</b>	( ) YES ( ) NO				
<b>C - Pollution Control</b>	( ) YES ( ) NO				
<b>D - Flood Zone</b>	( ) YES ( ) NO				
<b>E – Soil Erosion/Country Drain</b>	( ) YES ( ) NO				
<b>F – Twp. Water/Sewer</b>	( ) YES ( ) NO				
<b>G – Water/County Health Dept.</b>	( ) YES ( ) NO				
<b>H – Septic/County Health Dept</b>	( ) YES ( ) NO				
<b>I – Country Road Comm.</b>	( ) YES ( ) NO				
<b>J – Assessing Dept.</b>	( ) YES ( ) NO				

**COMPUTER PROPERTY TAX #** \_\_\_\_\_

**ALL PERSONAL AND PROPERTY TAXES ARE CURRENT:**    YES \_\_\_\_\_    NO \_\_\_\_\_

**VII. VALIDATION**

Signature of the applicant on this application constitutes a certification by the applicant that the site plan, as submitted is complete and accurate in all aspects. The township, further shall have the right to rely on the accuracy of the same in connection with the issuance of permits and the conducting of required inspections.	APPROVED BY  _____ (SIGNATURE)  _____ (TITLE)
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