## **APPLICATION FOR BUILDING PERMIT**

**Michigan Building Codes 2015** 

CHARTER TOWNSHIP OF ALPENA Building Safety Department 4385 US 23 North, Alpena, MI 49707 (989) 356-0297, ext. 4 ~ Fax (989) 356-9540 www.alpenatownship.com

PERMIT FEE: \$PLAN REVIEW FEE: \$  TOTAL FEES: \$  PERMIT INFORMATION REQUIRED  [ ] LOCATION OF STRUCTURE:  ADDRESS:	O – AS PER	* Payable to: (C	S – 230 OF 1972 A	F ALPENA	
BETWEEN CROSSROADS:					
PROPERTY TAX I.D. #					
[ ] PROPERTY OWNER IDENTIFIC	CAATION:				
NAME OF OWNER/LESSEE:					
ADDRESS:					
CITY, STATE, ZIP:					
PHONE: ()	_ CELL: (	)	FAX:(	)	
EMAIL:					
[ ] CONTRACTOR IDENTIFICATION:					
NAME OF BUSINESS:					
NAME OF CONTRACTOR:					
PHONE: ()					
EMAIL:					
ADDRESS:# Street/Road				State	Zip
BUILDER'S LICENSE NUMBER:			EXPIRATION	<u>DATE</u> :	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION:					
WORKER'S COMP INSURANCE CARRIE REASON FOR EXEMPTION:					
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION:					

[ ] ARCHITECT OR ENG	INEER: (IF APPLICABLE)	Registration Act o	f 1937, as ame	ended.	
NAME OF ARCHITECT	OR ENGINEER:				
FIRM NAME:					
PHONE: ()	# Street/Road CELL: ()	City		State _)	Zip
EMAIL:					
LICENSE NUMBER:		EXP	IRATION DAT	E:	
TYPE OF CONSTRUC					
NEW BUILDING ADDITION REMODEL OTHER	☐ FOUNDATION ONLY MOBILE HOME MODULAR RELOCATION	ROOF WINDOWS SIDING EXTERIOR DOO	ORS	POOL PORCH DECK	
PROPOSED USE OF 1	BUILDING				
RESIDENTIAL:  ONE FAMILY  TWO OR MORE FAMILY  # OF UNITS  HOTEL, MOTEL  # OF UNITS	ATTACHED GARAGI POLE BUILDING DETACHED GARAGI OTHER	Ξ #	OF BATHROO	S	
□ INDUSTRIAL	☐ OFFICE, BANK, PROI☐ PUBLIC UTILITY☐ STORE, MERCANTIL se of non-residential building:		□ TOWE □ OTHE		
[ ] ESTIMATED COST O	F CONSTRUCTION: \$				
SELECTED CHARAC	TERISTICS OF BUILDING:				
PRINCIPAL TYPE OF FOUN BASEMENT: UN-FINISHED PIERS CRAWLSPACE INSULATED CONCRETE FOR	DATION: FINISHED	POURED CONC BLOCK PERMANENT W OTHER:	OOD FOUNDA		
PRINCIPAL TYPE OF FRAM MASONRY, WALL BEARING	WOOD FRAME	STRUCTURAL S		REINFORCEI CONCRETE	D
OTHER:					
PRINCIPAL TYPE OF HEATIN		D 🗆 OTHER	:		

DIMENSIONS DATA:				
NUMBER OF STORIES:	FLOOR AREA BASEMENT:	EXISTING	ALTERATIONS	NEW
USE GROUP:	1 <sup>ST</sup> FLOOR:			
CONST. TYPE:	2 <sup>ND</sup> & ABOVE:			
NO. OF OCCUPANTS :	TOTAL AREA:			
WILL THERE BE AN ELEVATOR?   V	ES   NO   HAS ".	BARRIER FREE" B	EEN ADDRESSED?	□ YES □ NO
[ ] DEMOLITIONS:				
MOST RECENT USE OF STRUCTURE H	BEING ELIMINATED? (	(Example: Residence	e, Retail, Storage, Etc.)	
LAND FILL RECEIPTS MUST BE SUB	MITTED BEFORE PRO	DJECT IS FINALIZ	ZED.	
[ ] RESPONSIBILITY:				
APPLICANT IS RESPONSIBLE FOR:				
1.) SUBMITTING <b>ALL REQUIR</b> 2.) <b>PAYMENT</b> OF ALL FEES	Č	•	C.	
3.) CALLING FOR ALL INSPEC 4.) OBTAINING ANY OTHER P				
5.) IF A NEW COMMERCIAL BU	JILDING, PURCHASING	A KEYED LOCK	BOX SYSTEM THROU	JGH THE
CHARTER TWP OF ALPENA SC	OUTHSIDE FIRE DEPT A	AT (989) 354-2616, 2	2201 US 23 S, ALPENA	A, MI 49707.
ORDERED TO APPEAR HERE BY "PU			 20" STATE OF MICI	 HICAN:
	DEIC RC1 250, 01 177	2, AI (D 133 OF 130	o . STATE OF WITCH	nom.
PLEASE READ BEFORE SIGNING:				
I hereby certify that the proposed work is au application as his/her AUTHORIZED AGE: ALL INFORMATION SUBMITTED ON T	NT, and WE AGREE to co	onform to all applica	ble laws of the STATE	OF MICHIGAN.
ALSO READ:				
SECTION 23a OF THE STATE CONSTIBEING SECTION 125, 1523a OF THE M CIRCUMVENT THE LICENSING REQ PERFORM WORK ON A RESIDENTIA 23a ARE SUBJECT TO CIVIL FINES.	IICHIGAN COMPILED UIREMENTS OF THIS	LAWS, PROHIBI' STATE RELATIN	TS A PERSON FROM IG TO PERSONS WH	CONSPIRING TO O ARE TO
				<del></del>
Owner's Signature (Required)		Print Name		
Date Signed				
Applicant/Contractor/Agent Signature		Print Name		
<b>Date Signed</b>		Building Official	Approved	Date

[	SITE OR PLOT PLAN -	- FOR APPLICANT USE
IND	DICATE DIRECTION OF NOI	RTH IN CIRCLE: