



APPLICATION FOR BUILDING PERMIT AND PLAN REVIEW
CHARTER TOWNSHIP OF BROWNSTOWN
 21313 TELEGRAPH ROAD
 BROWNSTOWN, MI 48183
 PHONE (734) 675-0166 FAX (734) 675-7459
www.brownstown-mi.org

**PROVIDE AS MUCH
 INFORMATION AS IS
 APPLICABLE**

The Charter Township of Brownstown will not: Discriminate against any individual or group because of race, sex, age, national origin, color, marital status, handicap, or political beliefs.

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

I. PROJECT INFORMATION

MODEL NAME / NUMBER		ADDRESS	
PROJECT DESCRIPTION		STATE	ZIP CODE
Between	And		

II. IDENTIFICATION

A. OWNER OR LESSEE

Name		Address	
City	State	Zip Code	Phone

B. ARCHITECT OR ENGINEER

Name		Address	
City	State	Zip Code	Phone

Builder License Number	Expiration
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C. CONTRACTOR

Name		Address	
City	State	Zip Code	Phone

Builder / Contractor License Number	Expiration date
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Federal Employer ID Number or Reason for Exemption	Drivers License Number
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Workers Comp Insurance Carrier or Reason for Exemption

MESC Employee Number or Reason for Exemption

III. TYPE OF IMPROVEMENT AND PLAN REVIEW

A. TYPE OF IMPROVEMENT (PLEASE CIRCLE)

1. New Building	3. Alteration	5. Demolition	7. Foundation Only	9. Relocation
2. Addition	4. Repair	6. Mobile Home Set-up	8. Premanufactured	10. Special inspection

B. PLAN REVIEW REQUESTED (PLEASE CIRCLE)

1. FOUNDATION	2. BUILDING	3. ELECTRICAL	4. MECHANICAL	5. PLUMBING
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COMMENTS:

IV. PROPOSED USE OF BUILDING

A. RESIDENTIAL (PLEASE CIRCLE)		R - 1	R - 2	R - 3	R - 4
1. One Family	3. Hotel or Motel No. of Units _____	5. Detached Garage			
2. Two or More Family No. of Units _____	4. Attached Garage	6. Other _____			

B. NON-RESIDENTIAL (PLEASE CIRCLE)			
7. Amusement	10. Parking Lot	13. Office, Bank, Professional	16. Store, Mercantile
8. Church, Religion	11. Service Station	14. Public Utility	17. Tanks, Towers
9. Industrial	12. Hospital, Institution	15. School, Library, Educational	18. Other _____

DESCRIBE IN DETAIL PROPOSED WORK TO BE COMPLETED OR USE OF BUILDING, E.G. FOOD PROCESSING PLANT, MACHINE SHOP, LAUNDRY BUILDING AT HOSPITAL, RENTAL 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. Masonary	2. Wood Frame	3. Structural Steel	4. Reinforced Concrete	5. Other

B. TYPE OF SEWAGE DISPOSAL	
6. Public	7. Septic System

C. TYPE OF WATER SUPPLY	
8. Public	9. Private Well or Cistern Wayne County Permit # _____

D. TYPE OF MECHANICAL			
10. Will there be air conditioning?	yes _____ no _____	Will there be fire suppression?	yes _____ no _____

E. DIMENSIONS / DATA					
12. Number of Stories	_____	16. FLOOR AREA	EXISTING	ALTERATIONS	NEW
13. Use Group	_____	Basement	_____	_____	_____
14. Construction Type	_____	1st & 2nd Floor	_____	_____	_____
15. Number of Occupants	_____	Garage Area	_____	_____	_____
		TOTAL AREA	_____	_____	_____

F. NUMBER OF OFF STREET PARKING SPACES.			
17. Enclosed	_____	18. 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	Phone
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Address	City	State	Zip Code
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Drivers License Number

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 AGENT AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125, 11523A, 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.

SIGNATURE OF APPLICANT

Application Fee \$ _____	Construction Value \$ _____
Building Permit Fee \$ _____ (to be determined)	Total Due \$ _____

VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

Control Approvals

PLANS ARE ENCLOSED WITH APPLICATION.	REQUIRED?	FEE DUE	DATE	NUMBER	REVIEWED BY:
A-PLAN REVIEW	YES _____ NO _____				
B-BUILDING PLAN REVIEW	YES _____ NO _____				
C-CERTIFICATE OF OCCUPANCY	YES _____ NO _____				
D-ZONING / VARIANCE	YES _____ NO _____				
E-SOIL EROSION	YES _____ NO _____				
F-FLOOD ZONE (A, B, OR C)	YES _____ NO _____				
G-FIRE REVIEW	YES _____ NO _____				
	YES _____ NO _____				
	YES _____ NO _____				
	YES _____ NO _____				

VIII. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP _____	BASE FEE _____
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____
SQUARE FOOTAGE _____	

APPROVAL SIGNATURE

TITLE <i>BUILDING OFFICIAL</i>	DATE
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