

Township of Palmyra

DEPARTMENT OF ZONING AND BUILDING INSPECTION
 Lenawee County, Michigan
Building Inspector and Zoning Administrator:
Todd Roach Ph 517-937-9050

Include check payable to Palmyra Twp.

Return to: Todd Roach
17866 Lulu Rd.
Petersburg MI. 49270
troach@cass.net

APPLICATION FOR
PLAN EXAMINATION AND
BUILDING PERMIT

IMPORTANT- Applicant to complete all items in sections: I,II,III, IV, V and VI.

1 LOCATION OF BUILDING	AT LOCATION _____ ZONING DISTRICT _____
	(AT) _____ (STREET) _____
	BETWEEN _____ AND _____
	(CROSS STREET) _____ (CROSS STREET) _____
TAX ID _____ PAO _____ LOT _____ BLOCK _____ SIZE _____	

II. TYPE AND COST OF BUILDING- All applicants complete A - D

<p>A. TYPE OF IMPROVEMENT</p> <p>1 <input type="checkbox"/> New Building</p> <p>2 <input type="checkbox"/> Addition (if residential, enter new housing units added, if any, in Part D, 13)</p> <p>3 <input type="checkbox"/> Alteration (See 2 Above)</p> <p>4 <input type="checkbox"/> Repair, replacement</p> <p>5 <input type="checkbox"/> Wrecking (if multifamily residential, enter number of units in building in Part D, 14)</p> <p>6 <input type="checkbox"/> Tearoff/Reroof</p> <p>7 <input type="checkbox"/> Moving (relocation)</p> <p>8 <input type="checkbox"/> Foundation Only</p>	<p>D. PROPOSED USE - for "Wrecking" most recent use</p> <table style="width: 100%;"> <tr> <th style="width: 50%;">RESIDENTIAL</th> <th style="width: 50%;">NONRESIDENTIAL</th> </tr> <tr> <td>13 <input type="checkbox"/> One Family</td> <td>19 <input type="checkbox"/> Amusement, recreational</td> </tr> <tr> <td>14 <input type="checkbox"/> Two or more family-Enter number of units.....</td> <td>20 <input type="checkbox"/> Church, other religious</td> </tr> <tr> <td>15 <input type="checkbox"/> Transient hotel, motel, or dormitory-Enter number of units.....</td> <td>21 <input type="checkbox"/> Industrial</td> </tr> <tr> <td>16 <input type="checkbox"/> Garage</td> <td>22 <input type="checkbox"/> Parking Garage</td> </tr> <tr> <td>17 <input type="checkbox"/> Carport</td> <td>23 <input type="checkbox"/> Service Station, repair garage</td> </tr> <tr> <td>18 <input type="checkbox"/> Other-Specify _____</td> <td>24 <input type="checkbox"/> Hospital, institutional</td> </tr> <tr> <td></td> <td>25 <input type="checkbox"/> Office, bank, professional</td> </tr> <tr> <td></td> <td>26 <input type="checkbox"/> Public utility school, library, other educational</td> </tr> <tr> <td></td> <td>27 <input type="checkbox"/> _____</td> </tr> <tr> <td></td> <td>28 <input type="checkbox"/> Stores, mercantile</td> </tr> <tr> <td></td> <td>29 <input type="checkbox"/> Tanks, towers</td> </tr> <tr> <td></td> <td>30 <input type="checkbox"/> Other-Specify _____</td> </tr> </table>	RESIDENTIAL	NONRESIDENTIAL	13 <input type="checkbox"/> One Family	19 <input type="checkbox"/> Amusement, recreational	14 <input type="checkbox"/> Two or more family-Enter number of units.....	20 <input type="checkbox"/> Church, other religious	15 <input type="checkbox"/> Transient hotel, motel, or dormitory-Enter number of units.....	21 <input type="checkbox"/> Industrial	16 <input type="checkbox"/> Garage	22 <input type="checkbox"/> Parking Garage	17 <input type="checkbox"/> Carport	23 <input type="checkbox"/> Service Station, repair garage	18 <input type="checkbox"/> Other-Specify _____	24 <input type="checkbox"/> Hospital, institutional		25 <input type="checkbox"/> Office, bank, professional		26 <input type="checkbox"/> Public utility school, library, other educational		27 <input type="checkbox"/> _____		28 <input type="checkbox"/> Stores, mercantile		29 <input type="checkbox"/> Tanks, towers		30 <input type="checkbox"/> Other-Specify _____
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<p>B. OWNERSHIP</p> <p>9 <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.)</p> <p>10 <input type="checkbox"/> Public (Federal, State, or Local government)</p>																											

<p>C. COST</p> <p>11 Cost of improvement..... To be installed but not included in the above cost.</p> <p>a. Electrical.....</p> <p>b. Plumbing.....</p> <p>c. HVAC.....</p> <p>d. Other (elevator, etc.).....</p> <p>12 TOTAL COST OF IMPROVEMENT _____</p>	(Omit cents)	<p>Nonresidential - Describe in detail proposed use of building(s), e.g. food processing plant, machine shop, laundry building of 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.</p>
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III. SELECTED CHARACTERISTICS OF BUILDING- For new buildings and additions, complete Parts E -L; for wrecking, complete only Part J, for all others skip to V

<p>E. PRINCIPAL TYPE OF FRAME</p> <p>31 <input type="checkbox"/> Masonry (wall bearing)</p> <p>32 <input type="checkbox"/> Wood frame</p> <p>33 <input type="checkbox"/> Structural steel</p> <p>34 <input type="checkbox"/> Reinforced concrete</p> <p>35 <input type="checkbox"/> Other - Specify _____</p>	<p>G. TYPE OF SEWAGE DISPOSAL</p> <p>41 <input type="checkbox"/> Public or private company</p> <p>42 <input type="checkbox"/> Private (septic tank, etc.)</p> <p>H. TYPE OF WATER SUPPLY</p> <p>43 <input type="checkbox"/> Public or private company</p> <p>44 <input type="checkbox"/> Private (well, cistern.)</p>	<p>J. DIMENSIONS</p> <p>49 Number of stories.....</p> <p>50 Total square feet of floor area, all floors based on exterior dimensions</p> <p>51 Total land area, sq. ft.</p>	
<p>F. TYPE OF HEAT</p> <p>36 <input type="checkbox"/> Gas</p> <p>37 <input type="checkbox"/> Oil</p> <p>38 <input type="checkbox"/> Electricity</p> <p>39 <input type="checkbox"/> Coal</p> <p>40 <input type="checkbox"/> Other</p>	<p>I. TYPE OF MECHANICAL</p> <p style="color: red;">Will there be central air conditioning?</p> <p>45 <input type="checkbox"/> YES 46 <input type="checkbox"/> NO</p> <p style="color: red;">Will there be an elevator?</p> <p>47 <input type="checkbox"/> YES 48 <input type="checkbox"/> NO</p>	<p>K. NUMBER OF OFF-STREET PARKING SPACES</p> <p>52 Enclosed.....</p> <p>53 Outdoors.....</p>	<p>L. RESIDENTIAL BUILDINGS ONLY</p> <p>54 Number of bedrooms</p> <p>55 Number of Full..... bathrooms Partial.....</p>

IV. IDENTIFICATION - *To be completed by all applicants*

Name		Mailing Address	Zip Code	Telephone No.
1. Owner or lessee				
2. Contractor	Applicant Name (print)			
	Builders License number		Exp. Date	
	Federal Employer No or Reason for Exemption			
	Workers Comp. Ins. Carrier or Reason for Exemption			
3. Architect or Engineer	Contract, Power of attorney, Letter of Authorization filed w/ Township			

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 this jurisdiction.

Section 23a of the State Construction Code Act of 1972, Act No. 230 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 residential structure. Violations of Section 23a are subject to civil fines.

Applicant Signature	Address	Date
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V. SITE OR PLOT PLAN DRAWN TO SCALE - *For Applicant Use*

VI. ZONING PLAN EXAMINERS NOTES *For Office Use*

ZONING DISTRICT			
USE			
FRONT YARD			
SIDE YARD		SIDE YARD	
REAR YARD			
NOTES			

VII. PLAN REVIEW RECORD *For Office Use*

Plans Review Required	Check	Plan Review Fee	Date Plans Approved	Notes
BUILDING				
PLUMBING				
MECHANICAL				
ELECTRICAL				
OTHER				

VIII. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS

Permit or Approval	Check	Date Obtained	Permit or Approval	Check	Date Obtained
BOILER			PLUMBING		
ROAD COMMISSION			WELL		
SOIL EROSION			SEPTIC		
ELECTRICAL			OTHER		
HVAC					

IX. ENVIRONMENTAL CONTROL APPROVALS

ZONING	REQUIRED?	DATE APPROVED	PERMIT NUMBER
VARIANCE GRANTED	() YES () NO		
WELL	() YES () NO		
SEPTIC	() YES () NO		

X. VALIDATION

Building Permit Number _____	FOR DEPARTMENT USE
Building Permit Issue Date _____	
Permit Fee _____	
Plan Review Fee _____	
Use Group _____ Occupant load _____ _____ Building Inspector, Palmyra Twp.	