



WASHTENAW COUNTY DEPARTMENT OF BUILDING SERVICES

BUILDING INSPECTION DIVISION — SOIL EROSION DIVISION
705 NORTH ZEEB ROAD, P.O. BOX 8645, ANN ARBOR, MI 48107-8645
PHONE (734) 222-3900 FAX (734) 222-3930

www.eWashtenaw.org

APPLICATION FOR BUILDING PERMIT

AUTHORITY: P.A. 230 of 1972, AS AMENDED	PROJECT NUMBER
COMPLETION: MANDATORY TO OBTAIN PERMIT	PERMIT NUMBER
PENALTY: APPLICATION MUST BE COMPLETED, AND SIGNED OR PERMIT WILL NOT BE ISSUED.	PLAN REVIEW FEE VALIDATION HERE.

**NOTE: APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V, VI, VII AND VIII
SEPARATE APPLICATIONS MUST BE MADE FOR:
PLUMBING, MECHANICAL AND ELECTRICAL PERMITS**

I. LOCATION OF BUILDING			
ADDRESS		PROPERTY ID NUMBER	
CITY / VILLAGE	TOWNSHIP	ZIP CODE	
DIRECTIONS TO SITE			

II. IDENTIFICATION			
A. OWNER OR LESSEE		EMAIL	FAX NUMBER
NAME		DAYTIME TELEPHONE NUMBER	
ADDRESS	CITY	STATE	ZIP CODE
B. ARCHITECT OR ENGINEER			
NAME		DAYTIME TELEPHONE NUMBER	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NUMBER & EXPIRATION DATE	FAX #	EMAIL	
C. CONTRACTOR			
NAME		DAYTIME TELEPHONE NUMBER	
ADDRESS	CITY	STATE	ZIP CODE
BUILDERS LICENSE NUMBER & EXPIRATION DATE	FAX #	EMAIL	

III. TYPE OF IMPROVEMENT AND PLAN REVIEW				
A. TYPE OF IMPROVEMENT				
1. <input type="checkbox"/> NEW BUILDING	4. <input type="checkbox"/> REPAIR / REPLACE	7. <input type="checkbox"/> POLE BARN with	8. <input type="checkbox"/> RELOCATION	11. <input type="checkbox"/> OTHER
2. <input type="checkbox"/> ADDITION	5. <input type="checkbox"/> DEMOLITION	7A. <input type="checkbox"/> GRAVEL FLOOR	9. <input type="checkbox"/> SWIMMING POOL	
3. <input type="checkbox"/> ALTERATION	6. <input type="checkbox"/> FOUNDATION ONLY	7B. <input type="checkbox"/> CONCRETE FLOOR	10. <input type="checkbox"/> DECK	
B. REVIEW(S) TO BE PERFORMED				
<input type="checkbox"/> BUILDING	<input type="checkbox"/> ELECTRICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> ENERGY

VI. SOIL EROSION

- YES** **NO** Are you disturbing one or more acres (approximately 208' x 208') of earth?
- YES** **NO** Are you building within 500 ft. of **surface water**?
(definition of **surface water** — ponds, lakes, streams, rivers, wetlands, detention/retention areas, drainage ditches or catch basins)
- YES** **NO** Is project located in **residential development**?
(definition of **residential development** — subdivisions, site condominium, and lot splits of three or more)
- YES** **NO** Is this a non-residential or multi-family project?

If **YES** to **ANY**, a Grading/SESC **Permit** is required before a building permit can be issued.

VII. ENVIRONMENTAL HEALTH ISSUES

- YES** **NO** Is the proposed project occurring on a parcel that is less than 2.0 acres in size?
- YES** **NO** Does the proposed project involve the addition of any bedroom, bathrooms or additional plumbing?
- YES** **NO** Does the proposed project involve changing 50% or more of the original floor plan?

Depending on the answers to these questions, you may need a site review of your septic system or an onsite well review by Washtenaw County Environmental Health or sign an Environmental Health waiver.

VIII. APPLICANT INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.

NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE

FEDERAL I.D. NUMBER / SOCIAL SECURITY 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 AUTHORIZED AGENT. I/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, 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 A RESIDENTIAL STRUCTURE. VIOLATIONS OF SECTION 23A ARE SUBJECT TO CIVIL FINES.

SIGNATURE OF APPLICANT

DATE

FOR OFFICE USE ONLY — DO NOT WRITE ON THIS PAGE

ADDITIONAL APPROVALS OR DOCUMENTS					
	REQUIRED?	RECEIVED	DATE	NUMBER	BY
A — ZONING	<input type="checkbox"/> YES <input type="checkbox"/> NO				
B — 2 SITE PLANS	<input type="checkbox"/> YES <input type="checkbox"/> NO				
C — (2) SETS OF BUILDING PLANS	<input type="checkbox"/> YES <input type="checkbox"/> NO				
D — DRIVEWAY PERMIT	<input type="checkbox"/> YES <input type="checkbox"/> NO				
E — TAP IN SHEETS (LOCH ALPINE)	<input type="checkbox"/> YES <input type="checkbox"/> NO				
F — GRADING PERMIT	<input type="checkbox"/> YES <input type="checkbox"/> NO				
G — GRADING WAIVER	<input type="checkbox"/> YES <input type="checkbox"/> NO				
H — POLLUTION PREVENTION	<input type="checkbox"/> YES <input type="checkbox"/> NO				
I — HEALTH PERMITS	<input type="checkbox"/> YES <input type="checkbox"/> NO				
J — HEALTH PERMIT WAIVER	<input type="checkbox"/> YES <input type="checkbox"/> NO				
K — LICENSE REGISTERED	<input type="checkbox"/> YES <input type="checkbox"/> NO				
L — AFFIDAVIT (HOMEOWNER)	<input type="checkbox"/> YES <input type="checkbox"/> NO				
M — OTHER	<input type="checkbox"/> YES <input type="checkbox"/> NO				

DESCRIPTION OF WORK

REVIEW(S) PERFORMED

ELECTRICAL _____ BY / DATE
 PLUMBING _____ BY / DATE
 MECHANICAL _____ BY / DATE

Plan Review Fee _____

Building Permit Fee _____

Certificate of Occupancy Fee _____

GIS Fee _____

Use Group _____

Construction Classification _____

Occupancy Load _____

Approved By: _____

Building Dept. _____ Date _____

Title _____

ADDITIONAL COMMENTS: