

Plainfield Township Building and Zoning Department

P.O. Box 247 Hale, MI 48739

PH (989) 728-2811 FX (989)728-6491

Authority: P.A. 230 of 1972 As Amended

RESIDENTIAL BUILDING PERMIT REQUIREMENTS

RESIDENTIAL STRUCTURES: ONE AND TWO FAMILY RESIDENTIAL STRUCTURES LESS THAN 3500 SQUARE FEET, ADDITIONS, GARAGES, MOBILE AND MANUFACTURED HOMES.

- _____ **Zoning or Land Use Permit from Plainfield Township (SITE PLAN SUBMITTED)**
- _____ **Septic Permit or Septic System Evaluation from District Health Department #2**
- _____ **Soil Erosion Permit where construction is within 500 feet of a body of water or wetlands**
- _____ **A complete, signed Building Permit Application. Applicant must be the person Performing the work.**

RESIDENTIAL CONSTRUCTION

- _____ **Construction Plans: A minimum of 2 sets of plans. One set for our File and one set to be Returned with approval. Plans must include:**
 - Foundation and Floor Plans**
 - Roof and Wall Section**
 - Building Elevations**
 - Truss Certification: For all structures using purchased trusses. One copy in the permit file and A COPY IS TO BE KEPT AT THE JOB SITE FOR THE ROUGH/FRAME INSPECTION.**

MOBILE AND MANUFACTURED HOMES:

- _____ **Construction Plans: A minimum of 2 sets of plans. One set for our File and one set to be Returned with approval. Plans must include:**
 - Foundation / Footing**
 - Method of anchoring the unit to the foundation**

PLANS MUST BE SUBMITTED BEFORE A PERMIT CAN BE ISSUED.

Plans are required for all building types: R:106.1.1 Construction Documents shall be of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this code.

PERMIT INFORMATION- APPLICANT MUST PROVIDE DOCUMENTS OF APPROVALS

- A. **ZONING APPROVAL: REQUIRED FOR ALL NEW CONSTRUCTION AND CHANGE OF USE PROJECTS**
- B. **HEALTH DEPARTMENT APPROVAL: SEPTIC APPROVAL REQUIRED FOR NEW CONSTRUCTION AND ADDITIONAL BEDROOMS FOR EXISTING HOMES ON SEPTIC.**
- C. **SOIL EROSION REVIEW: REQUIRED WHENEVER LAND IS DISTURBED (FOUNDATION, GRADING, ETC) WITHIN 500 FEET OF A WATERWAY OR WETLAND OR WHEREVER ONE OR MORE ACRES OF LAND IS DISTURBED. WATERWAY INCLUDES LAKES, STREAMS, CANALS, ACTIVE COUNTY DRAINS.**

The Building and Zoning Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. (If you need help with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make your needs known to this agency.

Authority: 1972 PA 230

Completion: Mandatory

Penalty: Permit cannot be issued

Plainfield Township Building Department
Application for Residential Building Permit
P.O. Box 247 Hale, MI 48739
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Construction work shall not be started until the application for permit has been reviewed and the permit has been issued. All work shall be in conformance with the Residential Building Code. **No work shall be concealed until it has been inspected and approved.** When ready for an inspection, call the Building Department at (989) 728-2811 providing a 24-48 hour notice.

JOB LOCATION _____ **TOWNSHIP/RANGE/SECTION** _____

DIRECTION TO JOB _____

Type of Job: () New Single Family () Remodel Single Family () Addition () Accessory Bldg. () Foundation Only
() Special Inspection () Premanufactured () Demolition () Other _____

OWNER

CONTRACTOR

First Name _____

Business Name _____

Last Name _____

Licensee _____

Address _____

Address _____

City _____

City _____

State, Zip _____

State, Zip _____

Phone # / E MAIL _____

Phone # / E MAIL _____

Estimated Project Cost _____

State License # _____ **Expires** _____

PLANS MUST BE SUBMITTED BEFORE A PERMIT CAN BE ISSUED.

Plans are required for all building types: R:106.1.1 Construction Documents shall be of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this code.

PLAN REVIEW: 106.2 Site Plan: The construction documents submitted with the application for permit may be accompanied by a site plan showing to scale the size and location of new construction and existing structures on the site and the distances from the lot lines.

EXPIRATION OF PERMIT: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work.

A PERMIT WILL BE CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED BUT MAY BE REINSTATED.

APPLICANT SIGNATURE

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, 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 subjected to civil fines.

HOMEOWNER AFFIDAVIT

I hereby certify the construction work described on this permit application shall be constructed **by myself in my own home** in which I am living or about to occupy. All work shall be completed in accordance with the Residential Building Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Building Inspector. I will cooperate with the Building inspector and assume the responsibility to arrange for necessary inspections.

Signature of Licensee or Homeowner (Homeowner signature indicates compliance with above affidavit).

Date

FOUNDATION SYSTEM (check appropriate foundation type and provide design detail)

1. _____ CRAWL SPACE: ATTACH FOOTING AND FOUNDATION DETAIL WITH CONSTRUCTION PLANS.
2. _____ BASEMENT: ATTACH FOOTING AND FOUNDATION DETAIL WITH CONSTRUCTION PLANS.
3. _____ POLE FRAME: ATTACH CONSTRUCTION PLANS.
4. _____ PIERS: ATTACH PLAN ILLUSTRATING, LOCATION, DEPTH, PLACEMENT, AND CONSTRUCTION PLANS FOR BUILDING.
5. _____ SLAB ON GRADE: ATTACH FOUNDATION DESIGN AND CONSTRUCTION PLANS FOR BUILDING
6. _____ MANUFACTURED HOME FOUNDATION: ATTACH PLANS FROM MANUFACTURER.

TYPE OF FRAMING

1. _____ WOOD 2. _____ MASONRY 3. _____ STRUCTURED STEEL 4. _____ OTHER: _____

DIMENTIONS OF NEW CONSTRUCTION: (CONSTRUCTION PLANS REQUIRED)

NUMBER OF FLOORS: _____ (INCLUDE WALKOUT BASEMENT AS A FLOOR)

BUILDING DIMENTIONS:

DWELLING:	LENGTH	X WIDTH	AREA	WALL HEIGHT
BASEMENT				
CRAWL SPC				
1ST FLOOR				
2ND FLOOR				
3RD FLOOR				
GARAGE/ACCESSORY BUILDING				
1ST FLOOR				
2ND FLOOR				
PORCH #1				
PORCH #2				

TOTAL SQUARE FOOTAGE OF PROJECT _____

ENVIROMENTAL INFO- APPLICANT MUST PROVIDE DOCUMENTS OF APPROVALS

- D. ZONING APPROVAL: REQUIRED FOR ALL NEW CONSTRUCTION AND CHANGE OF USE PROJECTS
- E. HEALTH DEPARTMENT APPROVAL: SEPTIC APPROVAL REQUIRED FOR NEW CONSTRUCTION AND ADDITIONAL BEDROOMS FOR EXISTING HOMES ON SEPTIC.
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BUILDING DEPARTMENT VALIDATION: MAKE CHECKS PAYABLE TO PLAINFIELD TOWNSHIP

BUILDING PERMIT FEE \$ _____ DATE _____ ADDITIONAL FEES _____
 RECIEPT NUMBER# _____ RECEIPT NUMBER# _____
 PLAN REVIEW APPROVAL DATE: _____ DATE _____
 BUILDING PERMIT ISSUED: _____

APPROVAL BY : _____ DATE _____

The inspector's telephone number shall be provided on the permit form. When ready for an inspection, call this office providing as much advance notice as possible. Please have the Permit Number and job address when calling.

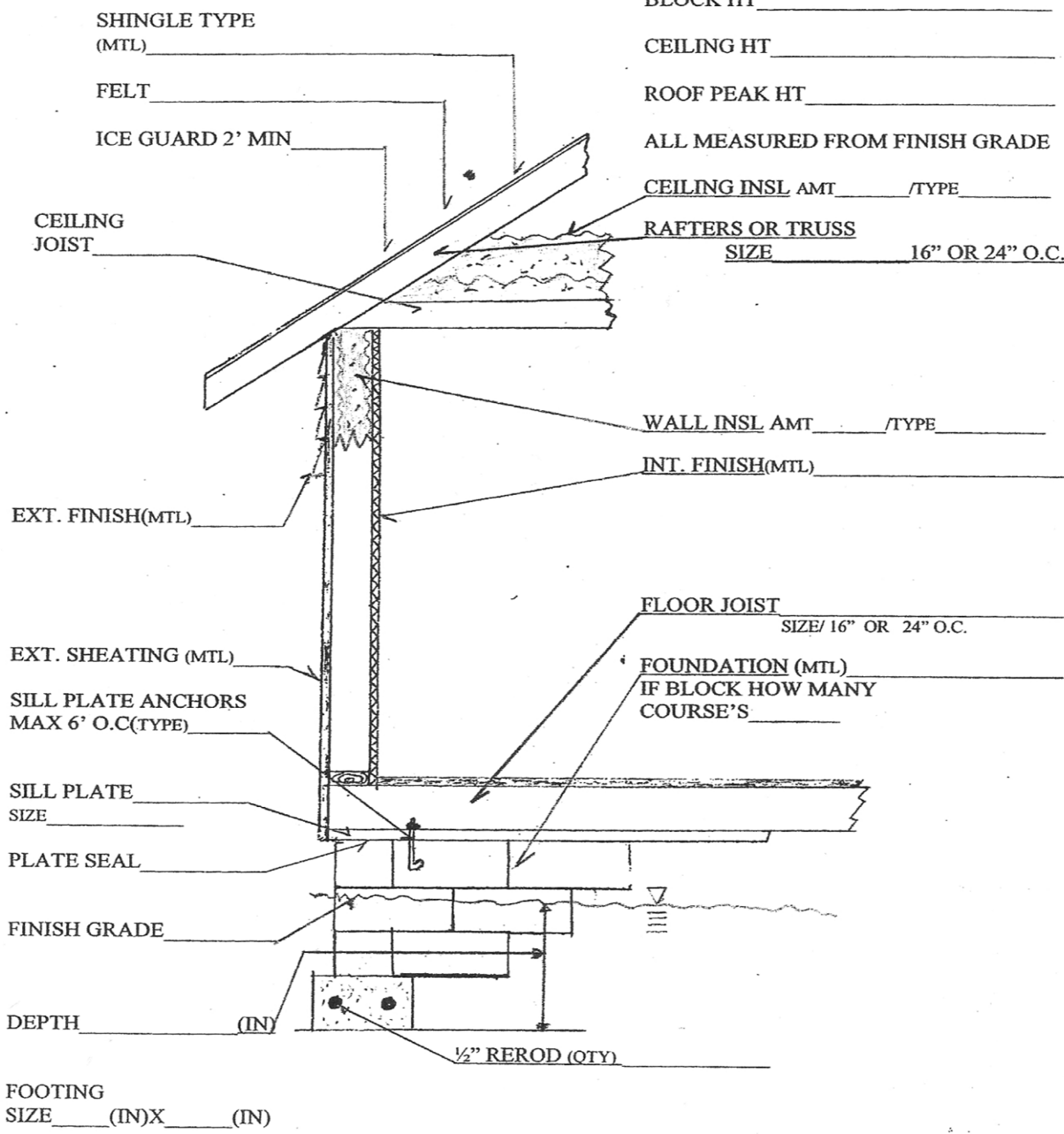
The Building and Zoning Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. (If you need help with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make your needs known to this agency.

Authority: 1972 PA 230
 Completion: Mandatory
 Penalty: Permit cannot be issued

GENERAL INFORMATION:

WALL SECTION

THREE ELEVATION DIMENSIONS ARE REQUIRED.



SHINGLE TYPE
(MTL) _____

FELT _____

ICE GUARD 2' MIN _____

CEILING
JOIST _____

EXT. FINISH(MTL) _____

EXT. SHEATHING (MTL) _____

SILL PLATE ANCHORS
MAX 6' O.C(TYPE) _____

SILL PLATE
SIZE _____

PLATE SEAL _____

FINISH GRADE _____

DEPTH _____ (IN)

FOOTING
SIZE _____ (IN)X _____ (IN)

BLOCK HT _____

CEILING HT _____

ROOF PEAK HT _____

ALL MEASURED FROM FINISH GRADE

CEILING INSL AMT _____ /TYPE _____

RAFTERS OR TRUSS
SIZE _____ 16" OR 24" O.C.

WALL INSL AMT _____ /TYPE _____

INT. FINISH(MTL) _____

FLOOR JOIST
SIZE/ 16" OR 24" O.C.

FOUNDATION (MTL)
IF BLOCK HOW MANY
COURSE'S _____

1/2" REROD (QTY) _____