BUILDING PERMIT APPLICATION

OFFICE USE ONLY Oceana County Building Department 844 S. Griswold Ste 200 Permit # _____ Fee _____ Hart. MI 49420 Receipt _____ (231)873-5355 Payment bi@oceana.mi.us **Property Owner** _Township_____ Name Property #64-__-_ Date purchased (approx.)_____ Site Address____ ____City/Vlg_____ **Property Owner Mailing Address Contractor Information** Company Name____ Name _____ Mail Address Address City City _____ State/Zip____ State/Zip____ Email _____ Email License Holder Name Phone # Cell Phone # State License # Exp Date_____ Phone #_____ Cell Phone# **Architect** (commercial) Name_____ Fed ID # _____ UIA Empl #_____ Address_____ City/State/Zip _____ Work Comp Carrier **Driving Directions**: (include nearest cross roads & landmarks, do not rely on GPS) Dimensions/data Commercial Residential Use Group # of bedrooms Construction Type # of full bathrooms UF Basement Finish Basement 2nd Floor Occupancy Load # of ½ bathrooms 1st Floor # of Units Porch Deck Garage Pole Barn Description of job with sizes each story, decks, garage, finished or unfinished basement etc. (what building): NOTES: 1. ELECTRICAL, PLUMBING AND MECHANICAL PERMITS ARE SEPARATE, THEY ARE NOT INCLUDED IN THIS PERMIT APPLICATION. 2. NEW HOUSES, ROOM ADD AND/OR REMODEL OVER 50% REQUIRE APPROVED BLOWER DOOR TEST ON SITE AT TIME OF FINAL INSPECTION.

Calculations (Office use only):

1 of 2

BUILDING PERMIT APPLICATION

TO BE WITH BUILDING PERMIT APPLICATION – if required by your project (All forms must be submitted together. Incomplete apps WILL BE returned)

House Number Form (Equalization- New house/New structure on vacant lot)
Zoning Permit or Waiver (Township)
Site Plan (Property lines – where on property is work being done, where is septic, well, drain field)
Plans/Drawings (Specs, dimensions, cross sections, etc.)
Uniform Energy Code (Heated space – R Values on insulation)
Truss Prints
Bldg Sys App Rep (BOCA Home ONLY)
Septic & Well Permit - Health Department (New system/New Home)
Health Dept. BPA (ALL properties that have septic and/or well on it when adding any size structure)
Driveway Permit (Road Commission – County Road and No previous house on property)
Soil Erosion Permit or Waiver (Drain Commission-If within 500ft of water/wetland and over 225ft ² of earth disturbance, over 1 acre of earth disturbance in any area, or Commercial-new structures or additions)
EGLE Permit (flood plain, critical dune, or wetlands)
DNR Zoning Permit (Designated natural rivers)
ADDITIONAL REQUIREMENTS FOR DEMOLITION (along with top items)
Proof of No Asbestos (if hiring contractor) Yes No
Demo site plan remove & remain bldg. sizes Yes No
Utilities have/will be disconnected before work begins. Signature
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 OR REINSTATED. I hereby certify that the owner of record authorizes the proposed work and that I have been authorized by the owner to make the application as his/her authorized agent. We agree to conform to the State of Michigan Building Codes. 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 the 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. • It is the responsibility of the person signing this form to contact the inspection office when the project is ready for the necessary inspection(s). • Michigan Energy Code is in affect; must be completed on new houses and additions before permit can be issued.
Signed Applicant DOB Date
Contractor Property Owner
Print Applicant Name:
Egress and glazing requirements will be met on this project. Sleeping area requirements are that all egress windows from sleeping rooms must have a <u>minimum</u> net clear opening of 5.7 sq. ft. The <u>minimum</u> net clear opening height dimension shall be 24". The <u>minimum</u> net clear opening width dimension shall be 20".
Signed Dated