

## <u>BUILDING PERMIT APPLICATION –</u> RESIDENTIAL

## (1 or 2 FAMILY HOME ONLY)

#### **CONSTRUCTION AND BUILDING**

 City Hall:
 301 E. Huron St., Ann Arbor, MI 48107-6120

 Mailing:
 P.O. Box 8647, Ann Arbor, MI 48107-8647

 Phone:
 734.794.6263 ext. 0
 building@a2gov.org

Fax: 734.994.8460

### **APPLICATION MUST BE FILLED OUT COMPLETELY**

AUTHORITY: PA. 230 of 1972, AS AMENDED PENALTY: PERMIT WILL NOT BE ISSUED

	OFFICE USE ONLY				
Permit Number	BLDG#				
	DEMO#				
DATE STAMP					

PENALTY: PERMIT WILL NOT BE ISSUED					<u> </u>							
PROJECT LOCATION												
PROJECT NAME								ZON	ZONING DISTRICT			
PROPERTY ADDRESS (Street No. and Name)							LOT/	LOT/UNIT #				
CITY	ZIPCODE	Is this a Rental Prop.?   No						Yes,	# of Ur	of Units:		
APPLICANT INFORMATION												
NAME							PHONE/CELL # (AREA CODE)					
EMAIL ADDRESS							FAX No.					
ADDRESS	RESS					STATE				ZIPCODE		
OWNER INFORMATION												
NAME OF OWNER OR LESSEE							PHONE/CELL # (AREA CODE)					
EMAIL ADDRESS	AIL ADDRESS						FAX No.					
ADDRESS			CITY					STATI	E	ZIPCODE		
HOMEOWNER AFFIDAVIT												
applicable ordinances and rules and hereby agree to make this installation or construction in conformance with the ordinance. I realize that in making this application, I assume the responsibility of a licensed contractor for the work mentioned in this permit. I agree to notify the Building Division within 72 hours after the work is completed so that he required inspection (s) can be made. I further agree to keep all parts of this work exposed until accepted by the inspector.  Violation Penalties: Any person who shall violate any provision of the Ordinance or shall fail to comply with any of the requirements thereof, shall, upon conviction thereof, be punished by a fine not to exceed \$500.00, or by imprisonment for not to exceed 90 days or both such fine and imprisonment, in the discretion of the Court.												
Section 23A of the State Construction Code Act of 1	972, 1972 PA 23	30, MCL 125	.1523A,	prohibits a	persor	from	conspirin	g to cir	cumven	t the licensing requirement		
of this state relating to persons who are to perform	work on a resid	dential build	ling or a	residential	structı	ıre. Vi	olators o	f sectio	n <b>23A</b> aı	re subjected to civil fines.		
APPLICANT / HOMEOWNER / CONTRACTOR	SIGNATURE											
I, owner, or person(s) acting as owner's agent, agre all fees and costs that may come due as a result of	•		nit.	rith all term	s and o	onditio	ons of pe	rmit as		e issued, and agree to pay		
CONTRACTOR INFORMATION												
NAME				PHONE/CELL # (AREA CODE)				FAX No.	AX No.			
ADDRESS				CITY	STATE			E	ZIPCODE			
CONTRACTOR LICENSE #	EXPIRATION DATE			EMAIL ADDRESS								
FEDERAL EMPLOYER I.D. # (OR REASON FOR EXEMPTION)	<u>'</u>											
WORKERS COMPENSATION INSURANCE CARRIER (OR REASON FOR EXEMPTION)												
MESC EMPLOYEE #												



## **RESIDENTIAL BUILDING PERMIT APPLICATION**

# YOU MUST SUBMIT TWO (2) HARDCOPIES AND ONE (1) DIGITAL VERSION OF SITE PLANS

For additional requirements, refer to the attached checklist

ARCHITECT INFORMATION (if applicable)									
NAME PHONE/CELL# (#						REA CODE)			
COMPANY NAME FAX					AX No.				
ADDRESS			CITY	1	STATE	ZIPCODE			
EMAIL ADDRESS									
IS PROPERTY IN A HISTORIC DISTRICT?									
IS PROPERTY IN A FLOODPLAIN?									
TYPE OF JOB / PROJECT INFORMATION – COMPLETE A	LL INFORMAT	TION BELOW							
<b>DESCRIPTION</b> : Provide a detailed description of work to be cover	red by the permi	it (E.g. building	a 2,300 sq.ft family h	ome or replace 5 s	ame size exterior w	indows).			
PROJECT COST ESTIMATED PROJECT COST:									
The project cost must include material and labor for scope of p	permit, <u>includin</u>	ng mechanical,				d plumbing to			
obtain separate permits. Please provide payment information payment information included cannot be processed.	to process the	application us	ing the <i>payment co</i>	ver sheet. Any ap	plication received	without			
Type of Improvement Area Affect	ed	Type o	of Structure	Co	Comments to Reviewer				
		_							
Build / Finish		☐ Deck							
☐ Alteration (s) to ☐ Foundation on	nly 🗆	☐ Garage							
☐ Demolition of ☐ Other		Porch							
☐ Other ☐ Sq Ft ☐ Const. Type		Roof							
Const. Type		Siding							
		☐ Fence							
5		☐ Window:	#						
ZONING: For questions about zoning requirements, con-				a2aov.ora					
<b>ZONING:</b> For questions about zoning requirements, contact <u>Planning</u> at 734-794-6265 or planning@a2gov.org  Existing Use: Proposed Use:									
If constructing a new building or an addition to an existing	building, attac	ch a dimensio	ned site plan or sit	e survey and cor	nplete the section	n below:			
Max. Height above Grade: (measured to midpoint of sloped New Gross Floor Area: Stories Above Grade: Total Floor Area:									
roof)									
Number of Units Upon Completion: If the	addition is to t	the front of the	street side on a co	rner lot, provide t	he following:				
Avera	age front setba	ck of all prope	rties within 100 feet	is:					
OFFICE USE ONLY PLANNING AND ZONING NOTES AND SIGNATURE  DATE									
HISTORIC DISTRICT NOTES AND SIGNATURE									
GRADING NOTES AND SIGNATURE									
BUILDING NOTES AND SIGNATURE									
FEES									
BUILDING APPLICATION FEE: \$15.00		PLAN REVIE	W FEE:	\$					
CONTRACTOR REGISTRATION: \$15.00		BUILDING FE	E:	\$					
ZONING REVIEW: ☐\$24 ☐\$68	HISTORIC DISTRICT REVIEW \$				□ N/A				
SUBTOTAL: \$	TOTAL: \$								

A MINIMUM of 24 HOURS IS REQUIRED FOR REVIEW AND PROCESSING APPLICATION