



BUILDING PERMIT APPLICATION

City of Adrian – Building/Inspection Division
135 E. Maumee Street, Adrian, MI 49221
Phone: (517) 264-4814
Email: inspections@adrianmi.gov

FOR OFFICE USE

Permit # _____
Paid _____
Source _____

Authority: 1972 PA 230

Penalty: Failure to provide information may result in denial of your request.

The city of Adrian is an equal opportunity employer/program. Auxiliary aids, serves and other reasonable accommodation are available upon request to individuals with disabilities.

JOB/FACILITY Address

Street Address:		Type of work:	
Property Owner Name:		Telephone Number:	
Property Owner Address:		City:	State: Zip:
Is property located in Historic District? Yes _____ No _____			
If yes, attach "Certificate of Appropriateness" application for Historic Commission review			

APPLICANT

<input type="checkbox"/> Contractor <input type="checkbox"/> Architect/Engineer <input type="checkbox"/> Bus. Owner <input type="checkbox"/> Bldg. Owner <input type="checkbox"/> Homeowner		Name:	
Address:		Email address:	
City:	State:	Zip:	Telephone Number:
Contractor	Project Manager		Builders License # Expiration Date
	Federal Employer ID Number (or Reason for Exemption):		
	Worker's Comp Insurance Carrier (or Reason for Exemption):		
	Unemployment Insurance Agency Employer Account Number (or Reason for Exemption):		

ARCHITECT OR ENGINEER

Check this box to designate as "Design Professional in Responsible Charge": ☐

Architect/Engineer	Name:		Contact Person:
	Address:		Email address:
	City:	State:	Zip: Telephone Number:
	License Number		Expiration Date

PLAN REVIEW

Check all that apply to this project:

___ Building ___ Electrical ___ Mechanical ___ Plumbing ___ Fire Suppression ___ Fire Alarm

Four (4) full sets of plans are required when submitting for non- residential plan review. Construction documents must be **sealed** and **signed** by an architect or professional engineer in accordance with 1980, PA 299 as amended.

The seal and signature is not required for one and two family dwellings less than 3,500 square feet of calculated floor area or public work less than \$15,000 in total construction cost.

The City reserves the right to use an outside firm or agency to conduct plan reviews for the purpose of establishing code compliance. The applicant will be responsible for any fees charged by the firm or agency including administrative expensed incurred.

Note: Separate applications must be completed for Electrical, Mechanical, and Plumbing

Apply for permits online www.adriancity.com/services/community-development/amgonlinepermittingandinspections/

TYPE OF IMPROVEMENT (check all that apply)

☐ New Building ☐ Alteration/Repair ☐ Swimming pool ☐ Basement ☐ Accessory Building
☐ Addition ☐ Strip & Reroof ☐ Garage ☐ Shed ☐ Manufactured Home
☐ Deck/Ramp ☐ Pier/Footing ☐ Foundation Only ☐ Porch ☐ Special Inspection
☐ Demolition – **Have Utility companies been contacted for disconnect?** (Y) or (N)
☐ Gas _____ Electric _____ Water _____

☐ Other (describe) _____

PROPOSED USE OF BUILDING

- Residential
One-Family _____ Two Family _____ Mobile Home _____ Garage (detached) _____ Garage (attached) _____
Other _____
- Non-Residential
Commercial _____ Industrial _____ **Description:** _____

DETAILED DESCRIPTION OF WORK

DIMENSIONS/DATA

	FLOOR AREA	Existing	Alterations	New
Number of Stories _____	Basement	_____	_____	_____
Use Group _____	First & Second floor	_____	_____	_____
Construction Type _____	Third – Tenth floor	_____	_____	_____
Occupant Load _____	Eleventh – Above	_____	_____	_____
	TOTAL AREA	_____		

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 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00**

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES/CHARGES APPLICABLE TO THIS APPLICATION

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER(S) OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER(S) TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND 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. I FURTHER CERTIFY COMPLIANCE WITH MCL 125.1510(2).

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.

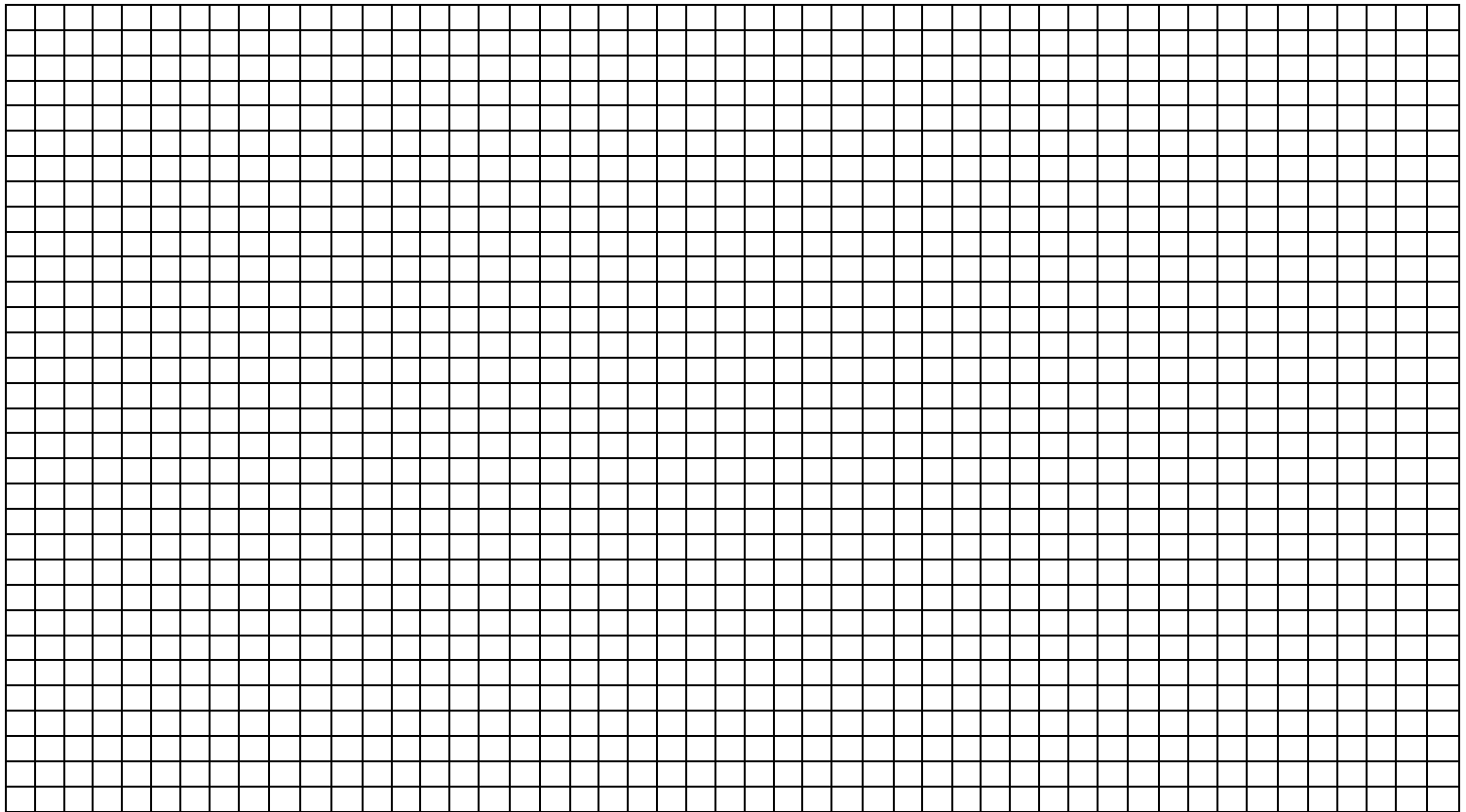
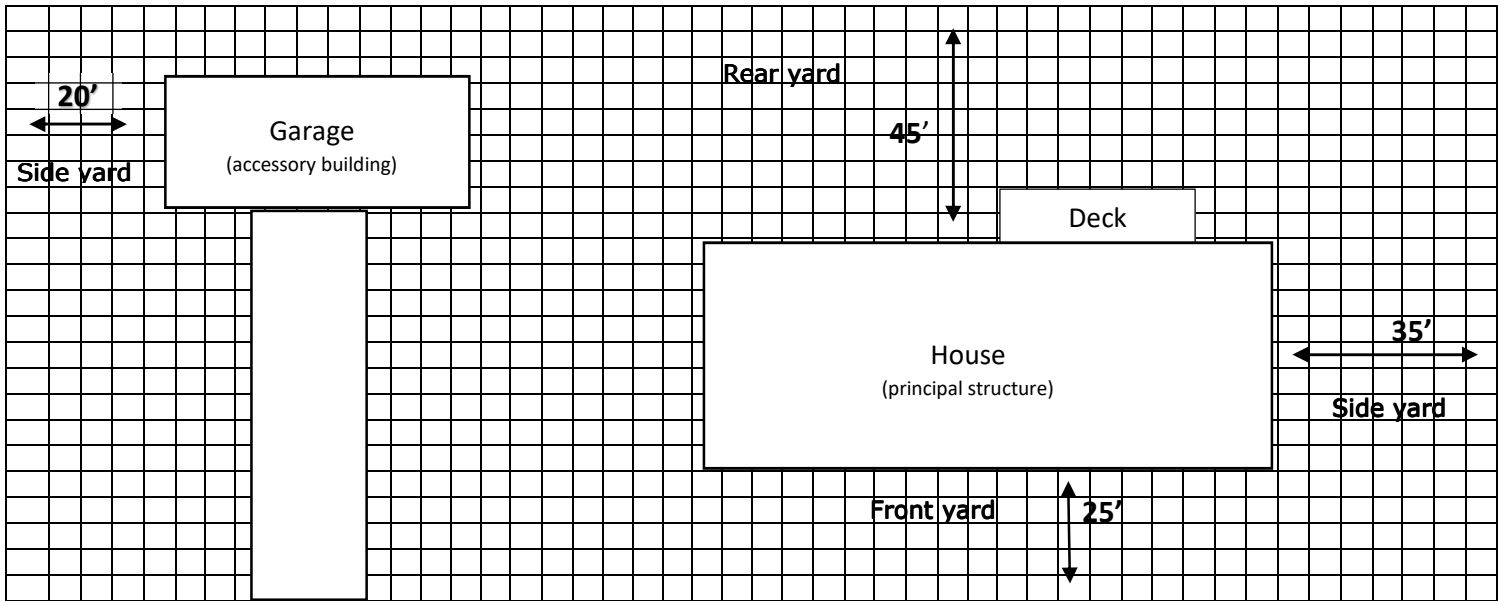
Signature of Applicant

X

Date:

Print Name

Contractors must show proof of State of Michigan license and register the license with the City of Adrian



Please draw the specifications for the building or structure of the proposed work. A site plan showing the dimension and the location of the proposed building or structure and existing buildings and/or structures on the same premises shall be shown.

- Construction shall not be started until the application has been filed with the City of Adrian building/inspection department.
- No work shall be **concealed** until it has been inspected.
- **Work started without a permit:** Any work started without obtaining a permit will be assessed a minimum \$100.00 fee.
- **All fees** shall be paid before a Certificate of Occupancy will be issued.

NON-RESIDENTIAL:

- | | | |
|---|---|--|
| <input type="checkbox"/> (A-1) ASSEMBLY (THEATRES, ETC.) | <input type="checkbox"/> (H-1) HIGH HAZARD (DETONATION) | <input type="checkbox"/> (M) MERCANTILE |
| <input type="checkbox"/> (A-2) ASSEMBLY (RESTAURANTS, BARS, ETC.) | <input type="checkbox"/> (H-2) HIGH HAZARD (DEFLAGRATION) | <input type="checkbox"/> (R-1) RESIDENTIAL 1 (HOTELS, MOTELS) |
| <input type="checkbox"/> (A-3) ASSEMBLY (CHURCHES, LIBRARIES, ETC.) | <input type="checkbox"/> (H-3) HIGH HAZARD (COMBUSTION) | <input type="checkbox"/> (R-2) RESIDENTIAL 2 (MULTIPLE FAMILY) |
| <input type="checkbox"/> (A-4) ASSEMBLY (INDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-4) HIGH HAZARD (HEALTH HAZARD) | <input type="checkbox"/> (R-3) RESIDENTIAL 3 (1 & 2 FAMILY) |
| <input type="checkbox"/> (A-5) ASSEMBLY (OUTDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-5) HIGH HAZARD (HPM) | <input type="checkbox"/> (R-4) RESIDENTIAL 4 (ASSISTED LIVING) |
| <input type="checkbox"/> (B) BUSINESS | <input type="checkbox"/> (I-1) INSTITUTIONAL 1 (SUPERVISED) | <input type="checkbox"/> (S-1) STORAGE 1 (MODERATE HAZARD) |
| <input type="checkbox"/> (E) EDUCATION | <input type="checkbox"/> (I-2) INSTITUTIONAL 2 (HOSPITALS ETC.) | <input type="checkbox"/> (S-2) STORAGE 2 (LOW HAZARD) |
| <input type="checkbox"/> (F-1) FACTORY (MODERATE HAZARD) | <input type="checkbox"/> (I-3) INSTITUTIONAL 3 (PRISONS ETC.) | <input type="checkbox"/> (U) UTILITY (MISCELLANEOUS) |
| <input type="checkbox"/> (F-2) FACTORY (LOW HAZARD) | <input type="checkbox"/> (I-4) INSTITUTIONAL 4 (DAY CARE ETC.) | |

WILL THERE BE FIRE SUPPRESSION? ☐ NO ☐ YES SCOPE OF WORK? _____

Type of Construction

- | | |
|---|---|
| <input type="checkbox"/> 1A - Non Combustible (Protected Structural Elements) 3HR | <input type="checkbox"/> 1B - Non Combustible (Rated Structural Elements) 2HR |
| <input type="checkbox"/> 2A - Non Combustible (Rated Structural Elements) 1HR | <input type="checkbox"/> 2B - Non Combustible (Non Rated Structural Elements) |
| <input type="checkbox"/> 3A - Non Combustibles (Exterior Walls Only) | <input type="checkbox"/> 3B - Non Combustible (Bearing Walls Rated) |
| <input type="checkbox"/> 4 - Heavy Timber | <input type="checkbox"/> 5A - Combustible (Structural Elements Rated) 1HR |
| <input type="checkbox"/> 5B - Combustible (All Elements Not Rated) | |

Local Governmental Agency to Complete This Section

ENVIRONMENTAL CONTROL APPROVALS					
	Required?		Approved by:	Date:	Notes:
A – Zoning	Yes	No			
B – Fire Department	Yes	No			
C – Pollution Control	Yes	No			
D – Noise Control	Yes	No			
E – Soil Erosion	Yes	No			Lenawee County Drain Commission
F – Flood Zone	Yes	No			
G – Water Supply	Yes	No			
H – Septic System	Yes	No			
I – Variance Granted	Yes	No			
J – Other	Yes	No			

Validation –For Department Use Only

Use Group _____ Construction Type _____ Application Fee \$100 (non-refundable) _____

Plan Review Fee _____ Number of Inspections _____

Square Footage _____

Comments: _____

Approval Signature _____

Title _____ Date _____