

CODE ENFORCEMENT SERVICES, INC.

215 West Main Street
Northville, MI 48167

Phone: (248) 449-9902
Fax: (248) 349-9244

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

CITY OF NORTHVILLE BUILDING DEPARTMENT

BUILDING PERMIT APPLICATION

Applicant to Complete All Items in Sections I, II, III, IV, V and VI

Note: Separate Applications Must be Completed for Plumbing, Mechanical and Electrical Work Permits. Additional required documents may include County approved well, septic, driveway permits as well as a soil erosion control permit if required by the County.

I. Project or Facility Information			
PROJECT NAME		ADDRESS	
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED CITY OF NORTHVILLE		COUNTY OAKLAND AND WAYNE	ZIP CODE
APPLICANT EMAIL ADDRESS:			
II. Applicant/Facility Contact Information			
A. Applicant			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (include area code)
B. Owner or Lessee			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (include area code)
C. Architect or Engineer			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (include area code)
LICENSE NUMBER			EXPIRATION DATE
D. Contractor			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (include area code)
BUILDERS LICENSE NUMBER			EXPIRATION DATE
FEDERAL EMPLOYER ID NUMBER (or reason for exemption)			
WORKERS COMP INSURANCE CARRIER (or reason for exemption)			
UNEMPLOYMENT INSURANCE AGENCY EMPLOYER ACCOUNT NUMBER (or reason for exemption)			
III. Type of Job			
A. Type of Improvement			
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ALTERATION <input type="checkbox"/> DEMOLITION <input type="checkbox"/> FOUNDATION ONLY <input type="checkbox"/> RELOCATION			
<input type="checkbox"/> ADDITION <input type="checkbox"/> SIGN <input type="checkbox"/> MOBILE HOME SET-UP <input type="checkbox"/> PRE-MANUFACTURED			

The following is a list of instructions and required documents to submit for New Construction/Additions. Place a checkmark in all boxes for items completed and attached.

BUILDING PERMIT APPLICATION

REQUIRED SUBMITTALS

- 1. Completed and signed permit application form.
- 2. Two sets of complete plans to include:
 - Site plan of property showing all buildings on the lot with setback distances to property lines from each building, porches and decks (front, rear and both sides)
 - Floor plan
 - Front, sides and rear elevations
 - Foundation plan with walkout details and emergency egress, if applicable
 - Window and door sizes and placement
 - Wall section detail
- 3. Two copies of completed Energy Code compliance sheets. You may use ResCheck or ComCheck.
- 4. Two copies of a certified grade survey which includes:
 - Topography lines at one foot intervals
 - Finish floor elevation
 - Adjacent center of street elevation
 - Proposed finished rough grade elevations, proposed drainage swales and or storm water drainage measures
- 5. One copy of Oakland or Wayne County Soil Erosion permit or waiver.
- 6. If tree removal is part of this project, submit a signed tree removal application complete with a site plan indicating trees to be removed.

Continue to page 2 and complete the rest of the application.

B. Plan Review Required

3 sets of construction documents are required with each application for a permit, unless waived by the building official when code compliance can be determined based on the description in the application.

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 and public work projects less than \$15,000 in total construction cost.

GIVE A BRIEF DESCRIPTION OF THE PROJECT: _____

IV. Plan Review Information

A. Residential – Buildings Regulated by the Michigan Residential Code

ONE FAMILY TOWNHOUSE - NO. OF UNITS _____ DETACHED GARAGE
 TWO OR MORE FAMILY ATTACHED GARAGE OTHER _____
NO. OF UNITS _____

B. Buildings Regulated by the Michigan Building Code (COMMERCIAL ONLY)

<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 (CHILD & ADULT CARE)
<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.)	

NEW COMMERCIAL CONSTRUCTION – Provide a brief description of the work to be covered by the building permit:

V. Building Data

A. Type of Mechanical

WILL THERE BE FIRE SUPPRESSION? YES NO **FORCED AIR** YES NO **BOILER** YES NO

B. 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)

C. Dimensions / Data

Basement square footage = _____	Setbacks: Front=____ Rear=____ Side=____ Side=____
1 ST Floor square footage = _____	
2 nd Floor square footage = _____	
Attached garage square footage = _____	Construction valuation=\$_____
Detached building square foot = _____	Note: This includes the costs of materials and labor to complete the project including all trades.
Deck square footage = _____	

D. Number of Off Street Parking Spaces

ENCLOSED _____ OUTDOORS _____

VI. Signature					
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/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.					
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 OWNER (If owner is applicant)			TYPE OR PRINT		
SIGNATURE OF OWNER'S AGENT			TYPE OR PRINT		
In order to keep accurate record cards, the Assessing Department will also conduct inspection(s) of your new construction.					
VII. Local Governmental Agency to Complete This Section					
ENVIRONMENTAL CONTROL APPROVALS					
	REQUIRED?	APPROVED	DATE	NUMBER	BY
A – Zoning	<input type="checkbox"/> Yes <input type="checkbox"/> No				
B – Site Plan Approval	<input type="checkbox"/> Yes <input type="checkbox"/> No				
C – Soil Erosion	<input type="checkbox"/> Yes <input type="checkbox"/> No				
D – Well	<input type="checkbox"/> Yes <input type="checkbox"/> No				
E – Septic/Sewer	<input type="checkbox"/> Yes <input type="checkbox"/> No				
VIII. Validation – For Department Use Only					
USE GROUP _____		PERMIT FEE BREAKDOWN			
		PERMIT FEE = \$ _____			
TYPE OF CONSTRUCTION _____		PLAN REVIEW FEE = \$ _____			
		PERMIT FEE BASED ON ADOPTED FEE SCHEDULE = \$ _____			
APPROVAL SIGNATURE			DATE		
TITLE: City of Northville Building Official			DATE		