

APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

**RAY TOWNSHIP
64255 WOLCOTT**

RAY TWP., MI 48096-2442

OFFICE HOURS: MONDAY THRU THURSDAY 9:00 AM – 4:00 PM

586-749-5171 - FAX 586-749-6190

AUTHORITY: P.A. 230 OF 1972, AS AMENDED	CONSISTANT WITH FEDERAL POLICY, RAY TOWNSHIP WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP, OR POLITICAL BELIEFS.
COMPLETION: MANDATORY TO OBTAIN PERMIT	
PENALTY: PERMIT WILL NOT BE ISSUED	

**APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V AND IX
NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED
FOR PLUMBING, MECHANICAL, AND ELECTRICAL WORK PERMITS**

I. LOCATION OF BUILDING
ADDRESS: _____
BETWEEN _____ AND _____ (CROSS STREET) (CROSS STREET)

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D												
A. TYPE OF IMPROVEMENT												
<table> <tr> <td>1. <input type="checkbox"/> NEW BUILDING</td> <td>2. <input type="checkbox"/> ADDITION</td> <td>4. <input type="checkbox"/> REPAIR</td> <td>6. <input type="checkbox"/> MOVING, RELOCATION</td> </tr> <tr> <td><input type="checkbox"/> PREMANUFACTURE</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> MOBILE HOME SET-UP</td> <td>3. <input type="checkbox"/> ALTERATION</td> <td>5. <input type="checkbox"/> DEMOLITION</td> <td>7. <input type="checkbox"/> FOUNDATION ONLY</td> </tr> </table>	1. <input type="checkbox"/> NEW BUILDING	2. <input type="checkbox"/> ADDITION	4. <input type="checkbox"/> REPAIR	6. <input type="checkbox"/> MOVING, RELOCATION	<input type="checkbox"/> PREMANUFACTURE				<input type="checkbox"/> MOBILE HOME SET-UP	3. <input type="checkbox"/> ALTERATION	5. <input type="checkbox"/> DEMOLITION	7. <input type="checkbox"/> FOUNDATION ONLY
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B. OWNERSHIP
8. <input type="checkbox"/> PRIVATE: (individual, corporation, non profit institution, etc.)
9. <input type="checkbox"/> PUBLIC: (Federal, State, or local government)

C. ESTIMATED COST
10. COST OF IMPROVEMENT: _____
11. TOTAL COST OF IMPROVEMENT (To be installed but not included in the above cost) Electrical, Plumbing, Heating & Air): _____

D. PROPOSED USE OF BUILDING												
RESIDENTIAL:												
<table> <tr> <td>12. <input type="checkbox"/> One Family</td> <td>14. <input type="checkbox"/> Hotel, Motel Enter # of units: _____</td> <td>16. <input type="checkbox"/> Carport</td> </tr> <tr> <td>13. <input type="checkbox"/> Two or More Family Enter # of units: _____</td> <td>15. <input type="checkbox"/> Garage Attached <input type="checkbox"/> Detached <input type="checkbox"/></td> <td>17. <input type="checkbox"/> OTHER – Specify _____</td> </tr> </table>	12. <input type="checkbox"/> One Family	14. <input type="checkbox"/> Hotel, Motel Enter # of units: _____	16. <input type="checkbox"/> Carport	13. <input type="checkbox"/> Two or More Family Enter # of units: _____	15. <input type="checkbox"/> Garage Attached <input type="checkbox"/> Detached <input type="checkbox"/>	17. <input type="checkbox"/> OTHER – Specify _____						
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NONRESIDENTIAL: DESCRIBE IN DETAIL PROPOSED USE OF BUILDING, E.G. FOOD PROCESSING PLANT, MACHINE SHOP, LAUNDRY BUILDING AT HOSPITAL, ELEMENTARY SCHOOL, SECONDARY SCHOOL, COLLEGE, PAROCHIAL SCHOOL, PARKING GARAGE FOR DEPARTMENT STORE, RENTAL OFFICE BUILDING, OFFICE BUILDING AT INDUSTRIAL PLANT. IF USE OF EXISTING BUILDING IS BEING CHANGED, ENTER PROPOSED USE.

V. APPLICANT INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.

NAME (PLEASE PRINT)	ADDRESS & E-MAIL
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CITY	STATE	ZIP CODE	TELEPHONE NUMBERS
			1. _____ 2. _____

FEDERAL I.D. NUMBER / DRIVER'S LICENSE NUMBER _____

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 APPLICANT: _____ **DATE:** _____

VI. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS

	REQUIRED?	APPROVED	DATE	NUMBER	BY
A. SOIL EROSION	<input type="checkbox"/> YES <input type="checkbox"/> NO				
B. WATER SUPPLY	<input type="checkbox"/> YES <input type="checkbox"/> NO				
C. SEPTIC SYSTEM	<input type="checkbox"/> YES <input type="checkbox"/> NO				
D. VARIANCE GRANTED	<input type="checkbox"/> YES <input type="checkbox"/> NO				
E. ZONING	<input type="checkbox"/> YES <input type="checkbox"/> NO				
F. POLLUTION CONTROL	<input type="checkbox"/> YES <input type="checkbox"/> NO				
G. FLOOD ZONE	<input type="checkbox"/> YES <input type="checkbox"/> NO				
H. OTHER	<input type="checkbox"/> YES <input type="checkbox"/> NO				

VII. PLAN REVIEW RECORD - FOR DEPARTMENT USE ONLY

Plan Reviews Required	Plan Review Fee	Date Plans Started	By	Date Plans Approved	By	Notes
BUILDING						
PLUMBING						
MECHANICAL						
ELECTRICAL						
OTHER						

VIII. VALIDATION - FOR DEPARTMENT USE ONLY

Building Permit number: _____

Use Group: _____

Building Permit issued: _____

Construction Type: _____

Building Permit Fee: \$ _____

Fire Grading: _____

Plan Review Fee: \$ _____

Live Loading: _____

Zoning Permit Fee: \$ _____

Approved by: _____

Title: Ray Township Building Inspector

