

TOWNSHIP OF RAY

Building Department

64255 Wolcott Road, Ray Township, MI 48096 (586) 749-5171 Building Department Ext 203 Fax (586) 749-6190 Website www.raytwp.org

MINIMUM REQUIREMENTS FOR RESIDENTIAL BUILDING PERMIT

1. COMPLETED AND SIGNED BUILDING PERMIT APPLICATION FORM.

2. VALID WATER SUPPLY PERMIT (MACOMB COUNTY HEALTH DEPARTMENT* SEE BELOW) AND WELL RECORD. <u>WELL</u> <u>REQUIRED BEFORE APPLICATION IS REVIEWED.</u>

3. VALID SEWAGE DISPOSAL PERMIT (MACOMB COUNTY HEALTHE DEPARTMENT* SEE BELOW). <u>NOTE:</u> The final grade of a building shell be a minimum of fourteen (14") inches, up to a maximum of thirty (30") inches, above the tile invert of the field as established by the Macomb County Health Department. Any other variances from these grade requirements must be submitted to the Ray Township Zoning Board of Appeals. (See Section 203 Building Grades – attached).

4. VALID CULVERT PERMIT (MACOMB COUNTY DEPARTMENT OF ROADS) ** SEE BELOW.

5. SOIL EROSION PERMITS, ACT #347 (MACOMB COUNTY PUBLIC WORKS). For house and/or pond.***SEE BELOW.

6. SITE PLAN (<u>3 COPIES FOLDED</u>) show proposed and existing grade and <u>must</u> show road elevation at both corners using Health Department Bench Mark. Must be a certified engineered grade. Show elevation, drain and swales on site plan. Any and all flood zones as indicated by FEMA flood map <u>MUST</u> be shown on plan. Plans no larger than 24"x36" (Standard size). (1 copy retained by Building department and 1 by Assessor).

7. 3 PRINTS OF PROPOSED STRUCTURE (STAPLED AND FOLDED) (1 copy retained by Building department and 1 by Assessor, 1 returned to builder/contractor). Proposed Structures over 3,500 square feet require Architectural Seal and Signature on every page. Building Inspector may require copies of roof trusses and/or floor trusses. This includes commercial. Plans no larger than 24"X36" (Standard Size).

8. MICHIGAN UNIFORM ENERGY CODE WORKSHEET.

9. HOMEOWNERS PERMIT (Estoppel Certificate) or CURRENT BUILDERS LICENSE REQUIRED. Builder to furnish letter authorizing signer if not same name. Builder to furnish: Federal employer I.D.#, M.E.S.C. Employer #, Copy of Workman's Compensation Insurance and Liability Coverage, Driver's License # and date of birth.

10. PLAN REVIEW APPLICATION FEE: Due with application. (NON-REFUNDABLE). HOMES UP TO 3,499 SQ. FT. - \$150.00 HOMES 3,500 SQ. FT AND OVER \$400.00

11. PERFORMANCE BOND required when permit is issued To 3,499 SQ. FT. - \$1,000.00 3,500 SQ.FT. AND OVER - \$2,000.00

12. PERMIT FEE: Required when permit is issued. See fee schedule attached.

13. A FINAL BUILDING INSPECTION IS REQUIRED FOR OCCUPANCY – ADDRESS POST IS REQUIRED FOR OCCUPANCY Address Plate and 4" reflective white numerals for each side of plate can be purchased for \$20.00 at the Ray Township Office.

*Macomb County Health Department 43525 Elizabeth Road Mt. Clemens, MI 48043 Phone (586) 469-5512 Fax (586) 469-5885 Web: health.macombgov.org **Macomb County Department of Roads 117 South Groesbeck Highway Mount Clemens, MI 48043 Phone (586) 463-8671 Fax (586) 469-6130 Web: roads.macombgov.org ***Macomb County Public Works 21777 Dunham Road Clinton Township, MI 48036 Phone (586) 469-5325 Fax (586) 469-5933 Web: publicworks.macombgov.org

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