



KALKASKA COUNTY CONSTRUCTION CODES

605 N. BIRCH STREET
 KALKASKA, MI 49646
 Phone (231) 258-3365 ext. 1
 www.Kalkaskacounty.net
 E-mail: KCCC@kalkaskacounty.org

APPLICATION FOR BUILDING PERMIT

NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING, MECHANICAL, AND ELECTRICAL WORK PERMITS

Permit Number (office use only)

1. JOB LOCATION	
Address	Township or Village
Parcel Number - - -	City Zip Code

2. IDENTIFICATION	
A. OWNER OR LESSEE	
Name	Address
City State Zip Code	Telephone Number
E-mail	Cell Number

B. CONTRACTOR	
Name	Address
City State Zip Code	Telephone Number
E-mail Fax Number	Cell Number
Builders License Number	Expiration Date
Federal Employer ID Number or Reason for Exemption	
Workers Comp Insurance Carrier or Reason for Exemption	
MESC Employer Number or Reason for Exemption	

C. ARCHITECT OR ENGINEER	
Name	Address
City State Zip Code	Telephone Number
E-mail Number	Cell Number

3. APPLICANT SIGNATURE
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 residential structure. Violators of Section 23a are subject to civil fines.
<small>EXPIRATION OF PERMIT: A permit becomes invalid if the authorized work is not commenced within six months after issuance of the permit or if authorized work is suspended or abandoned for a period of six months after the time of commencing the work. A PERMIT WILL BE REVOKED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. REVOKED PERMITS CANNOT BE REFUNDED OR REINSTATED.</small>
CONTRACTOR

I hereby certify that the proposed work described on this application is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her agent. All of the information submitted on this application is accurate to the best of my knowledge.		
Signature	Printed Name	Date

HOMEOWNER AFFIDAVIT		
I hereby certify that the work described on this permit application shall be installed by myself in my own home in which I am living or about to occupy. All work shall be installed in accordance with the Michigan Residential Building Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Kalkaska County Building Inspector. I will cooperate with the Kalkaska County Building Inspector and assume the responsibility to arrange for necessary inspections.		
Signature	Printed Name	Date

- | | | | | |
|---------------------------------------|-------------------------------------|--|---|---|
| 1. <input type="radio"/> New Building | 3. <input type="radio"/> Alteration | 5. <input type="radio"/> Demolition | 7. <input type="radio"/> Special Inspection | 9. <input type="radio"/> Manufacture Set Only: |
| 2. <input type="radio"/> Addition | 4. <input type="radio"/> Repair | 6. <input type="radio"/> Foundation Only | 8. <input type="radio"/> Relocation | <input type="radio"/> MRC <input type="radio"/> HUD |

4. PROPOSED USE OF BUILDING/Plan Review Information

A. RESIDENTIAL	B. Commercial	C. Estimated Cost of Construction
<input type="radio"/> One-Family, No. Bedrooms: ____ No. Full Baths: ____ No. Half Baths: ____ <input type="radio"/> Multi-Family, No. Units: ____ <input type="radio"/> Garage: <input type="radio"/> Attached <input type="radio"/> Detached <input type="radio"/> Townhouse, No Units: ____ <input type="radio"/> Post Frame Building <input type="radio"/> Other	<input type="radio"/> Assembly <input type="radio"/> Institutional <input type="radio"/> Business <input type="radio"/> Mercantile <input type="radio"/> Educational <input type="radio"/> Storage <input type="radio"/> Factory <input type="radio"/> Utility <input type="radio"/> High Hazard <input type="radio"/> Miscellaneous	\$ _____

D. Provide a description of the work to be covered by building permit as examples; 5,000 square foot alteration of interior office space, a 2500 square foot addition to storage building, replace 5 exterior windows and 2 doors, renovate basement in a residence to occupiable space, etc. If use of existing building is being changed, **enter proposed** use.

5. DIMENSION DATA

FLOOR AREA IN SQUARE FEET	SQUARE FOOTAGE	DEPARTMENT USE	FOUNDATION AREA
Foundation			<input type="radio"/> Craw I Space <input type="radio"/> Slab <input type="radio"/> Piers or Pads <input type="radio"/> Basement: <input type="radio"/> Finished <input type="radio"/> Unfinished No. of Stories
Main Floor			
Second Floor			
Covered Porch			
Enclsed Porch			
Deck			
Garage D Finished Interior <input type="radio"/> Unfinished Interior			
Post Frame Building			
Other			
TOTAL AREA			

6. VALIDATION - FOR DEPARTMENT USE ONLY

PERMIT APPROVALS	REQUIRED	APPROVED	DATE	NUMBER	BY
A. Address / Recorded Deed	<input type="radio"/> Yes <input type="radio"/> No				
B. Soil Erosion	<input type="radio"/> Yes <input type="radio"/> NO				
C. Health Department- Water/Sewer	<input type="radio"/> Yes <input type="radio"/> No				
D. land Use	<input type="radio"/> Yes <input type="radio"/> NO				
E. Driveway	<input type="radio"/> Yes <input type="radio"/> No				
F. State Energy Code	<input type="radio"/> Yes <input type="radio"/> No				
G. Two (2) Sets of Building Plans	<input type="radio"/> Yes <input type="radio"/> No				
H. Truss Details	<input type="radio"/> Yes <input type="radio"/> No				
I. MI Department of Environmental Quality	<input type="radio"/> Yes <input type="radio"/> No				
J. Flood Plain	<input type="radio"/> Yes <input type="radio"/> No				
K. Other	<input type="radio"/> Yes <input type="radio"/> No				

8. VALIDATION - FOR DEPARTM ENT USE ONLY

Use Group _____	
Type of Construction _____	Approved By: _____
Number of Inspections _____	Date: _____

PLAN REVIEW

PLEASE PROVIDE A BASIC SKETCH OF WORK BEING PERFORMED

OPTIONAL PLAN REVIEW DISCLAIMER

It is recommended that you have a Residential Building Plan Review done on your submitted Site Plans/drawings. This Optional Plan Review is to bring to your attention the code violations that could cause you problems during the Construction process as we review the Site Plans.

This Plan Review is NOT to design, suggest different ideas, recommend a trades or calculate your lumber sizes. The Plan Review does not suggest that there will be "NO" further violations, as all individuals' workmanship is not the same

I AGREE TO THE OPTIONAL PLAN REVIEW (\$60 FEE)

SIGN HERE _____

I DISAGREE TO THE OPTIONAL PLAN REVIEW

SIGN HERE _____

NO REFUNDS. Payments referred to herein shall not be refundable under ANY circumstances, including but not limited to the termination of this agreement for whatever reason.