

**Department of Engineering & Building**  
**3200 Biddle Avenue**  
**Wyandotte, Michigan**

**(734) 324-4550**

**PERMIT #** \_\_\_\_\_

**APPLICATION TO WRECK A BUILDING -**

Location, ownership and details must be correct, complete and legible.  
Details must be filed with this application.

Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

**BUILDING LOCATED AT:** \_\_\_\_\_

Owner: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

**BUILDING SIZE:** \_\_\_\_\_ feet wide (x) \_\_\_\_\_ feet long (x) \_\_\_\_\_ feet high \_\_\_\_\_ stories

**TYPE OF BUILDING:** \_\_\_\_\_

Are you properly insured to protect the City and the public against all or any damages occurring from an accident or failure on this proposed job? \_\_\_\_\_

**WRECKING TO BE DONE IN ACCORD WITH THE REQUIREMENTS OF THE BUILDING CODE (see attached copy).**

**UTILITIES CUT:** gas \_\_\_\_\_ / water \_\_\_\_\_ / electricity \_\_\_\_\_ / cable \_\_\_\_\_

**WRECKING BOND:** \_\_\_\_\_ (date approved)

**AFFIDAVIT:** required if homeowner is securing permit

\_\_\_\_\_  
applicant's signature

## City of Wyandotte, Michigan Wrecking Bond

KNOW ALL MEN BY THESE PRESENTS, that we, \_\_\_\_\_, as  
principal, address \_\_\_\_\_ and  
\_\_\_\_\_, as surety, and address \_\_\_\_\_  
\_\_\_\_\_, are held and firmly bound unto the City of Wyandotte, Michigan,  
in the penal sum of \_\_\_\_\_ dollars (\$\_\_\_\_\_), lawful money of the  
United States of America, to be paid to the City of Wyandotte to which payment, we, and each of us,  
do jointly and severally bind ourselves, our representatives, heirs, executors, administrators,  
successors, and assigns, firmly by these presents. NOW THEREFORE, the condition of this obligation is  
such that whereas the above named principal \_\_\_\_\_ has duly  
applied for a permit for the wrecking or demolition of a building or structure at  
\_\_\_\_\_, in the City of Wyandotte. If such permit is issued to said principal,  
then said principal shall indemnify and save harmless the City of Wyandotte from any and all liability  
including, but not limited to, all claims, damages, expenses, suits, and proceedings of every kind and  
nature, caused by or arising from the aforesaid wrecking or demolition work and the issuance of the  
aforesaid permits, and if said principal shall observe the faithful performance of the terms of the  
Building Code and all other ordinances of the City of Wyandotte, and of the aforesaid permit, then this  
obligation to be null and void, otherwise to remain in full force and effects.

Signed and sealed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

in the presence of

\_\_\_\_\_

Principal

\_\_\_\_\_

Surety

APPROVED: \_\_\_\_\_  
City Attorney

DATE: \_\_\_\_\_



CITY OF WYANDOTTE, MICHIGAN

*Department of Engineering & Building*

Gregory J. Mayhew, P.E. City Engineer

### Affidavit for Building, Sidewalk, Approaches, and Curb Cut Permits

LOCATION: \_\_\_\_\_

A bona fide owner may do his/her own work, providing he/she applies for and secures a permit, pay the fee, does the work himself/herself in accordance with the provisions of the codes and rules of the City of Wyandotte, applies for inspections and receives approval of his/her work by the appropriate inspection authority. Failure to comply with these requirements will subject the owners permit to cancellation.

In making the application, I realize I am assuming the responsibility of a licensed contractor for the construction and/or installation of the work mentioned in the permit. I further agree that I shall neither hire any other person for the purpose of constructing and/or installing, nor sub-contract to any other person, firm, or corporation any portion of the construction and/or installation of equipment at the above premises.

I agree to request inspection as required by City Ordinance and Department Rules and to keep all parts of the construction and/or installation exposed until the Department of Engineering and Building has accepted the construction and/or installation as being in compliance with the Code Requirements.

I certify that I will perform the work under the requirements of the above rules governing homeowner's permits.

I further agree to correct all violations and will provide access to the premises between the hours of 9:00 a.m. to 5:00 p.m., Monday through Friday for necessary inspections.

\_\_\_\_\_  
Owner (Signature)

\_\_\_\_\_  
Present Address

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone No.

\_\_\_\_\_  
Email Address:

Subscribed and sworn to me before this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of Michigan, County of Wayne

My Commission Expires: \_\_\_\_\_

Acting in the County of \_\_\_\_\_

If you have any questions regarding the work, please consult the Inspector prior to beginning work.

If other problems arise, please contact the Engineering Office Supervisor at (734) 324-4551. .

W:Owner's Affidavit.doc

**CITY OF WYANDOTTE  
DEPARTMENT OF ENGINEERING AND BUILDING  
WYANDOTTE, MICHIGAN 48192  
734.324.4551  
734.324.4535 FAX  
engineering1@wyan.org**

PUBLIC ACT 135 OF 1989

CONTRACTOR INFORMATION

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Fax: \_\_\_\_\_

Contractor's License #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Federal Employer ID Number or  
Reason for Exemption: \_\_\_\_\_

Workers' Comp. Insurance Carrier or  
Reason for Exemption: \_\_\_\_\_

MESC Employer Number or  
Reason for Exemption: \_\_\_\_\_

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.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

The following are also authorized to secure permits for the above named company:

\_\_\_\_\_  
\_\_\_\_\_

**Registration Fee: \$45.00 (Registration expires when license expires)**

**Copy of license, driver's license and insurance to be attached.**

**Receipt/Check # \_\_\_\_\_**



## BUILDING PERMIT FEES

### Residential Building Permit Fees

Base Fee .....	50.00
Plus \$13.00 per \$1,000 to \$250,000 (starting at \$0)	
Plus \$15.00 per \$1,000 above \$250,000	
Reinspection fee for permit inspections (each inspection) .....	40.00

### Commercial Building Permit Fees

Base Fee .....	50.00
Plus \$16.00 per \$1,000 to \$250,000 (starting at \$0)	
Plus \$18.00 per \$1,000 above \$250,000	
Reinspection fee for permit inspections (each inspection) .....	50.00

### Building Bond Fees

One and two family dwellings .....	1,000.00
Multiple dwellings - each unit .....	500.00
Commercial/Industrial .25 (25 cents) per sq. ft. (each floor) - minimum .....	1,000.00

### Wrecking/Demolition Permit Fees

Accessory buildings (each building).....	50.00
Residential one and two family dwelling.....	150.00
Multiple, commercial, industrial buildings.....	300.00
Reinspection fee demolition (each inspection) .....	100.00

### Appeal Fees (fees are non-refundable)

	Residential	Commercial
Zoning Board of Appeals	200.00	400.00
Building Board of Appeals	100.00	200.00
Rezoning	300.00	600.00
Special Approval	125.00	200.00
Rezoning Plan Development	1,000.00	1,000.00

### Plan Review Fees

	Residential	Commercial
Parking Lots	50.00	75.00 (less than 6 spaces)
Parking Lots		150.00 (more than 6 spaces)
New Buildings	225.00	300.00
Garage	50.00	50.00
Additions	100.00	100.00
Utility Review (per block)	150.00	150.00
Site Plan Development	750.00	750.00
Preliminary PD Review	400.00	400.00
Final PD Review	300.00	300.00

**CITY OF WYANDOTTE  
DEPARTMENT OF ENGINEERING AND BUILDING  
DEMOLITION PERMITS**

(to be passed out with all demolition permits)

**Burning is prohibited unless permission is received from Fire Marshall and Air Pollution Control Official. Also, wrecking must be completed within thirty (30) days.**

**SECTION 3310.0 DEMOLITION AND EXCAVATION**

**Section 3310.1 General:** Demolition and excavation shall be done in accordance with this Section and Section 110.0 of this code.

**Section 3310.2 Scope of Demolition:** All buildings, accessory buildings, sheds, concrete slabs, foundations, floors, driveways and approaches, private and service sidewalks, fences, walls, etc., shall be wrecked and removed completely. All sewers, water lines, etc., shall be plugged and/or capped satisfactory to the code official before backfilling. An inspection of sewer cap and of foundation removal is required.

**Section 3310.3 Backfill:** Site backfilling shall be completed within five (5) working days of the removal of demolished building material and debris. Failure, for any reason, to backfill site as specified will require that the person causing the demolition or excavation install protective fencing around the site to the satisfaction of the code official. The person causing said demolition or excavation shall maintain the fencing to insure the purpose is being accomplished. As soon as practical, or at the direction of the code official, the fencing shall be removed and the site properly backfilled the same day.

Backfill shall be clean fill dirt, free from broken concrete, stones, wood and other miscellaneous debris. Documentation shall be submitted by the person causing the demolition or excavation certifying that the fill dirt is non-contaminated and non-hazardous by the code official before backfilling operations may begin.

All backfill shall be compacted by a dozer in approximately 12" lifts.

**Section 3310.4 Final grading:** All debris and building materials shall be completely removed from the premises. The property shall be smoothly graded and left in a neat condition with no low spots in which water might stand. Any damage to adjacent property or abutting public right-of-way, including sidewalks occurring during the demolition or excavation, shall be repaired by the person causing said demolition or excavation at his or her own expense.



**CITY OF WYANDOTTE  
DEPARTMENT OF ENGINEERING AND BUILDING  
DEMOLITION PERMITS  
(continued)**

**Section 110.1.1 Demolition Bond:** Before a permit to demolish or wreck a building shall be issued, the applicant shall file a bond conditioned on the principal indemnifying and saving harmless the City of Wyandotte from any and all liability including, but not limited to all claims, damages, expenses, suits and procedures of every kind and nature caused by or arising from the demolition or wrecking work authorized by said permit, and further conditioned upon the faithful performance of all the terms of the Building Code, of the ordinances of the City of Wyandotte, and of said permit. Said bond shall be in such amount considering the type, size and location of the building, and shall have such surety or sureties, as the Department of Legal Affairs may determine, and shall be approved by the Department of Legal Affairs as to form and substance prior to issuance of said demolition permit.

**Section 110.3 Lot Regulation:** Whenever a structure is demolished or removed, the premises shall be maintained free from all unsafe or hazardous conditions by the proper regulation of the lot and restoration of established grades to the approval of the code official.

**Section 110.4 Time Restriction:** Upon commencing the demolition of a structure, the work shall be continuous during the regular working hours, and the structure shall be completely removed and the site filled, cleared of debris, and graded within thirty (30) days of the issuance of a demolition permit, anything in Section 111.0 to the contrary, except that for reasonable cause, the code official may grant one or more extensions of time for additional periods not exceeding thirty (30) days each, the amount of additional time to be endorsed in writing upon said demolition permit.



JENNIFER M. GRANHOLM  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF ENVIRONMENTAL QUALITY  
DETROIT



STEVEN E. CHESTER  
DIRECTOR

## Checklist for Renovation/Demolition Operations

### RENOVATION PROJECTS

Your project may be regulated through the federal National Emissions Standards for Hazardous Air Pollutants (NESHAPs) and the following may apply:

- A thorough asbestos inspection may be required to be performed by an accredited asbestos inspector.
- Notification form submittal may be required.
- Asbestos abatement may be required.

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### DEMOLITION PROJECTS

Demolition projects involving commercial buildings and structures are regulated through the federal NESHAPs. Single family homes may be regulated if part of a public or private project. The definition of demolition in the NESHAPs regulations is as follows:

"The wrecking or taking out of any load-supporting structural member of a facility together with any related handling operations or the intentional burning of any facility."

- All commercial demolitions are regulated through the NESHAPs and a 10 working day notification is required.
- An asbestos inspection by an accredited asbestos inspector is required prior to demolition of commercial facilities.
- All regulated asbestos containing material must be removed prior to demolition of a regulated facility.

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### QUESTIONS?

Please contact Thomas Vincent, Asbestos Inspector, Michigan Department of Environmental Quality for projects in Wayne County if you would like further information and/or forms.

Ph: 313-456-4686 Fax-313-456-4692  
[vincentt@michigan.gov](mailto:vincentt@michigan.gov)





MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
(MDEQ) AIR QUALITY DIVISION  
NESHAP, 40 CFR Part 61, Subpart M

# NOTIFICATION OF INTENT TO RENOVATE/DEMOLISH



MICHIGAN DEPARTMENT OF LICENSING AND  
REGULATORY AFFAIRS (LARA), ASBESTOS PROGRAM  
P.A. 135 OF 1986, AS AMENDED, Section 220 (1-4) or (8)

## DEQ/LARA USE ONLY

Postmark Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Rec'd Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Valid No. \_\_\_\_\_

☐ OK ☐ Send Def Ltr. Date of Def Ltr. \_\_\_\_/\_\_\_\_/\_\_\_\_

FOLLOW UP \_\_\_\_/\_\_\_\_/\_\_\_\_ Spoke w/ \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Notification No. \_\_\_\_\_ Trans No. \_\_\_\_\_

### Calculate LARA Asbestos Project Fee:

(1% Project Fee)

Total Project Cost: \_\_\_\_\_ x 0.01 = \_\_\_\_\_

Type of Contractor: \_\_\_\_\_ License No.: \_\_\_\_\_

Licensing Authority: \_\_\_\_\_

### 1. NOTIFICATION:

Date of Notification: \_\_\_\_\_

Date of Revision(s): \_\_\_\_\_

Notification Type: ☐ Original ☐ Revised ☐ Canceled ☐ Annual

Mark appropriate boxes: (both DEQ and LARA may apply):

DEQ (NESHAP) [260 ln. ft./160 sq. ft. or more is threshold]

☐ Planned Renovation - 10 working days notice

☐ Emergency Renovation

☐ Scheduled Demolition - 10 working days notice

☐ Intentional Burn - 10 working days notice

☐ Ordered Demolition

LARA (MIOSHA) [Will not accept annual notifications]

☐ Demo, Reno, Encap. (>10 ln. ft./15 sq. ft.) 10 calendar days notice

☐ Emergency Renovation/Encapsulation

### 2. PROJECT SCHEDULE:

START DATE

END DATE

\* Renovation \_\_\_\_\_

+Asb. Removal \_\_\_\_\_

+Demolition: \_\_\_\_\_

Encapsulation: \_\_\_\_\_

Work Schedule: Please indicate the anticipated days of the week and work hours for the purpose of scheduling a compliance inspection.

Days of the Week

Work Hours

Asb. Removal: \_\_\_\_\_

Demolition: \_\_\_\_\_

Encapsulation: \_\_\_\_\_

\* Includes setup, build enclosure, asbestos removal, demobilizing, etc.

+Include only those dates you are conducting asbestos removal/demo.

☐ Check here if this is a multi-phased project, attach a schedule showing the start/end date of each phase.

### 10. IS ASBESTOS PRESENT?

☐ Yes ☐ No

☐ To be removed prior to demolition

Estimate the amount of asbestos: Include RACM (Regulated Asbestos Containing Material) to be removed, encapsulated, etc. Also include the amount and type (floor tile, roofing, etc.) of non-friable Category I and/or Category II ACM that will not be removed prior to demolition. (NOTE: In a demolition, cementitious ACM cannot remain in a structure, as it is likely to become regulated in the demolition/handling process. It must be removed prior to demolition.)

RACM to be  
Removed

RACM to be  
Encapsulated

Non-friable ACM not  
removed prior to demo.

Category I

Category II

Units of Measure

				<input type="checkbox"/> Ln. Ft.	<input type="checkbox"/> Ln. M.
				<input type="checkbox"/> Sq. Ft.	<input type="checkbox"/> Sq. M.
				<input type="checkbox"/> Cu. Ft.*	<input type="checkbox"/> Cu. M.*

\*Volume (cubic ft./meters) should be used only if unable to measure by linear/square measure (example: asbestos has fallen off of surface).

### 3. ABATEMENT CONTRACTOR:

Internal Project #: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 4. DEMOLITION CONTRACTOR:

Internal Project #: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 5. FACILITY OWNER: ("Facility" includes Bridges)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

### 6. FACILITY DESCRIPTION:

Facility Name: \_\_\_\_\_

Location Address/Description: \_\_\_\_\_

\_\_\_\_\_ If Apt. # of units: \_\_\_\_\_

City/Twp. \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Nearest Crossroad: \_\_\_\_\_

Size: (sq. ft.) \_\_\_\_\_ No. of Floors: \_\_\_\_\_ Floor No.: \_\_\_\_\_

Age: \_\_\_\_\_ Present Use: \_\_\_\_\_ Prior Use: \_\_\_\_\_

Specific Location(s) in Facility: \_\_\_\_\_

### 7. DISPOSAL SITE:

Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

### 8. WASTE TRANSPORTER 1:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

### WASTE TRANSPORTER 2:

### 9. ORDERED DEMOLITIONS: (See NESHAP regulations for definition of "Ordered Demolition.") A copy of the official Order must accompany this notification.

Gov't Agency Ordering Demo: \_\_\_\_\_

Name/Title of Person Signing Order: \_\_\_\_\_

Date of Order: \_\_\_\_\_ Date Ordered to Begin: \_\_\_\_\_

(continued on reverse side)



# **NOTIFICATION OF INTENT TO RENOVATE/DEMOLISH (continued)**

## **11. PROJECT DESCRIPTION:** Complete A) for Renovation (asbestos removal/encapsulation) and/or B) for Demolition:

### **A) RENOVATION:** Mark all surfaces/types of RACM to be removed:

☐ Piping    ☐ Fittings    ☐ Boiler(s)    ☐ Tanks(s)  
☐ Beam(s)    ☐ Duct(s)    ☐ Tunnel(s)    ☐ Ceiling Tile(s)  
☐ Mag Block    ☐ Other (describe) \_\_\_\_\_

### **Encapsulation (for LARA):** Mark surfaces/types to be encapsulated:

☐ Piping    ☐ Fittings    ☐ Boiler(s)    ☐ Tank(s)  
☐ Beam(s)    ☐ Duct(s)    ☐ Tunnel(s)    ☐ Ceiling Tile(s)  
☐ Other (describe) \_\_\_\_\_

**Method of removal:** Describe how the asbestos will be removed from the surface (example: glove bag, scrape with hand tools, cut in sections and carefully lower, etc.): \_\_\_\_\_

**B) DEMOLITION:** Describe the method of demolition of facility, bridge, etc., and indicate if complete or partial. If partial, describe which part of facility bridge, etc., will be demolished: \_\_\_\_\_

**12. ENGINEERING CONTROLS:** Describe work practices and engineering controls used to prevent visible emissions before, during, and after removal, and until proper disposal: \_\_\_\_\_

**13. UNEXPECTED ASBESTOS:** Describe the steps you intend to follow in the event that unexpected RACM is found or previously non-friable asbestos becomes friable (crumbled, pulverized, reduced to powder, etc.) and therefore regulated: \_\_\_\_\_

**14. PROCEDURE(S) USED TO DETECT THE PRESENCE OF ASBESTOS:** A) Indicate how you determined whether or not asbestos is in the facility. If analytical sampling was used, describe method of analysis. (The determination of the presence or absence of asbestos must be made prior to submitting a renovation/demolition notification.): \_\_\_\_\_

B) Name, address, and phone number of company performing asbestos survey: \_\_\_\_\_

C) Name, accreditation number of inspector, and date of inspection: \_\_\_\_\_

**15. EMERGENCY RENOVATIONS:** Date/time of emergency: \_\_\_\_\_ Describe the sudden, unexpected event: \_\_\_\_\_

Explain how the event caused unsafe conditions, and/or would cause equipment damage and/or an unreasonable financial burden: \_\_\_\_\_

**16.** I certify that an individual trained in the provisions of 40 CFR Part 61, Subpart M, will be on-site during the renovation and during demolition involving RACM above the threshold and/or during an ordered demolition. Evidence that this person has completed the required training will be available for inspection at the renovation or demolition site.

Signature of Owner or Abatement Contractor \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner or Demolition Contractor \_\_\_\_\_ Date \_\_\_\_\_

## **17. Signature Requirements for Projects with Negative Pressure Enclosures: (required by LARA)**

Per Section 221(1)(2) of P.A. 135 of 1986, as amended, clearance air monitoring is required for any asbestos abatement project involving 10 linear feet/15 square feet or more of friable material which is performed within a negative pressure enclosure. I (the building owner or lessee) have been advised by the contractor of my responsibility under Act 135 to have clearance air monitoring performed on this project.

Signature of Building Owner or Lessee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Asbestos Abatement Contractor Representative \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** It is not mandatory that a signed copy be sent to LARA unless requested. For affected projects, this section of the notification form must be completed, signed, and made part of your records before the project begins.

**18. I certify that the above information is correct:**

Printed Name of Owner/Operator \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner/Operator \_\_\_\_\_ Date \_\_\_\_\_

## **MAILING ADDRESSES/PHONE NUMBERS:** (See Item 1 to determine which agency requirements/regulations are applicable to your project.)

For Public Act 135 of 1986, as amended, Section 220 (1-4) or (8), mail to address below. For more info visit: <http://www.michigan.gov/asbestos>

MIOSHA Asbestos Program  
 LARA, CSHD  
 P.O. Box 30671  
 Lansing, MI 48909-8171

517.322.1320 (office), 517.322.1713 (fax)

For NESHAP Demolitions/Renovations, 40 CFR, Part 61, Subpart M, mail notifications to the appropriate address below (by county of subject facility): For more info visit <http://www.michigan.gov/deq> click on Air, then Asbestos NESHAP Program.

### **All Counties (except Wayne County)**

NESHAP Asbestos Program  
 DEQ, AQD  
 P.O. Box 30260  
 Lansing, MI 48909-7760

517.241.7463 (Office)  
 517.373.7064 (Revision Line)

### **Wayne County Only**

NESHAP Asbestos Program  
 Detroit Field Office, DEQ, AQD  
 Cadillac Place, Suite 2-300  
 3058 West Grand Boulevard  
 Detroit, MI 48202

313.456.4686