

## **Building Permit Application**

City of Menominee Building Department 2511 10<sup>th</sup> Street, Menominee, MI 49858 Ph. 906-863-3029, Fax 906-863-3266

**Instructions:** Complete all applicable sections of the application then submit with 2 sets of building plans and application fee (\$100/Commercial, \$50/Residential). Applicant will be notified of final review and building permit fees based on attached fee schedule. Applicant shall also submit with this application, or as a phased submittal, a copy of electrical, mechanical, fire protection, and plumbing permits issued by Michigan Bureau of Construction Codes and, if applicable, a soil erosion & sedimentation control permit issued by Menominee County Building Department.

I. Project Location	•	•			
ADDRESS			PROPERTY NUMBER		
II. Contact Information					
A. Owner or Lessee					
NAME					
BUSINESS		ADDRESS			
CITY		STATE	ZIP CODE	PHONE	
B. Registered Designer Profession	nal □ Check if Desig	in professional in re	sponsible charge (If n	iot, identify who	om will be in responsible charge)
NAME			LICENSE NUMBER		EXPIRATION DATE
BUSINESS			ADDRESS		
CITY	CITY STATE		ZIP CODE	PHONE	
EMAIL			MOBILE		
C. Contractor/Agent responsible f	or construction			<u> </u>	
NAME NAME		LICENSE NUMBER	EXPIRATION DATE		
BUSINESS			ADDRESS		
CITY	STATE		ZIP CODE	PHONE	
EMAIL	<u> i</u>			MOBILE	
FEDERAL EMPLOYER ID NUMBER (or reason	for exemption)		WORKERS COMP INSURANCE CARRIER (or reason for exemption)		
UIA NUMBER (or reason for exemption)					
D. Electrical Contractor – Provide	a copy of the electric	cal permit (issued b	y State) -  Check if	no electrical v	vork required
NAME	• •		LICENSE NUMBER		EXPIRATION DATE
BUSINESS		ADDRESS		<u> </u>	
CITY	STATE		ZIP CODE	PHONE	
EMAIL		MOBILE			
E. Mechanical Contractor – Provid	le a copy of the mecl	hanical permit (issu	ed by State of Michiga	։ n) – □ Check i	f no mechanical work required
NAME		LICENSE NUMBER		EXPIRATION DATE	
BUSINESS			ADDRESS		<u>.i</u>
CITY	STATE		ZIP CODE	PHONE	
EMAIL	<u>i</u>			MOBILE	

City of Menominee, Building Department **Building Permit Application** F. Plumbing Contractor – Provide a copy of plumbing permit (issued by State) – 
Check if no plumbing work required NAME LICENSE NUMBER EXPIRATION DATE BUSINESS ADDRESS CITY STATE ZIP CODE PHONE **EMAIL** MOBILE G. Fire Protection Contractor – Provide a copy of fire protection permit (issued by State of Michigan) – Check if no fire protection work required NAME LICENSE NUMBER EXPIRATION DATE BUSINESS **ADDRESS** CITY ZIP CODE PHONE STATE MOBILE **EMAIL** H. Soil Erosion & Sedimentation Contractor – Provide a copy of SESC permit (issued by Menominee County) – 🗆 Check if no SESC work required NAME LICENSE NUMBER **EXPIRATION DATE** BUSINESS **ADDRESS** CITY STATE ZIP CODE PHONE EMAIL MOBILE **III. Project Description** A. Project Description: □ NEW CONSTRUCTION □ ALTERATION □ RELOCATION □ DEMOLITION □ CHANGE-OF-USE □ FOUNDATION ONLY □ REPAIR □ MOBILEOFFICESETUP □ PREMANUFACTURE □ SPECIAL INSPECTION □ OTHER (describe): B. Use Group: (Identify the primary Use Group of the building & applicable sub-groups as defined by MBC Chapter 3)  $\square$  Assembly ( A ):  $\square$  A-1  $\square$  A-2  $\square$  A-3  $\square$  A-4  $\square$  A-5 ☐ Institutional ( I ): ☐ I-1 ☐ I-2 ☐ I-3 ☐ I-4 ☐ Business (B) □ Mercantile ( M ) □ Educational (E) □ Residential ( R ): □ R-1 □ R-2 □ R-3 □ R-4 □ Factory (F): □ F-1 □ F-2 ☐ Storage ( S ): ☐ S-1 ☐ S-2  $\square$  High Hazard ( H ):  $\square$  H-1  $\square$  H-2  $\square$  H-3  $\square$  H-4  $\square$  H-5 ☐ Utility and Miscellaneous (U) C. Type of Construction ☐ TYPE IA □ TYPE IIA ☐ TYPE IIIA ☐ IV – HEAVY TIMBER □ VA – LIGHTFRAME ☐ TYPE IB ☐ TYPE IIB ☐ TYPE IIIB □ VB – LIGHTFRAME D. Dimensions / Data FLOOR AREA EXISTING ALTERED Number of STORIES **BASEMENT USE GROUP** 1st 2nd FLOOR **CONSTRUCTION TYPE** 3<sup>rd</sup> – 10<sup>th</sup> FLOOR Number of OCCUPANTS 11<sup>th</sup> FLOOR & ABV \_ **TOTAL AREA** F. Water Supply □ PUBLIC (MUNICIPAL) □ PRIVATE WELL (Requires DEQ Well Permit) # E. Sewage Disposal □ PUBLIC (MUNICIPAL) □ PRIVATE SEPTIC SYSTEM (Requires County Sanitation Permit) # G. Mechanical Will this project require FIRE SUPPRESION? ☐ YES ☐ NO Will this project include AIR CONDITIONING? ☐ YES ☐ NO

City of Menominee, Building Department		<b>Building Permit Application</b>		
H. Primary Fuel Source				
☐ GAS ☐ OIL ☐ ELECTRICITY ☐ COAL ☐ OTHE	ER			
I. Number of Off Street Parking Spaces				
ENCLOSED SPACES	OUTDOOR SPACES			
J. Construction Cost (may be estimated, but must include electrical		d fire suppression work)		
	,g, gara p.pg, and			
<u>\$</u>				
IV. Plan Review				
Pursuant to 1980 PA 299, All applications for a building permit a nature and extent of the work proposed and shall show in detail and regulations. Plans for a proposed building, addition, or declifacilities, adjacent grades, property lines, and every existing building signature and seal of a registered Michigan architect or engined one- or two-family residential buildings less than 3,500 square fappropriate Plan Review Fee before a permit can be issued	I that the work will conform to the k shall include a site plan drawn to ilding on the property. A minimum er who shall assume responsibility eet. Plans must be submitted w	provisions of all relevant codes, laws, ordinances, rules a scale showing the location of all easements, drainage of two sets of such plans and specifications bearing the for their design, shall be required for all work except		
Plans are not required for alterations and repair work deter papering, tiling, carpeting, cabinets, counter tops, and similar fin awnings projecting less than 54 inches (1372 mm) and do not r doors with the same unit sizes, and swings and other playgrour	nish work; prefinished swimming p equire additional support (Use Gr	pools less than 24 inches (610 mm) deep; window oup R-3 and U occupancies); replacing windows or		
SITE PLAN APPROVAL:				
□ Review Not Required				
□ Plan Attached (Fee: \$50/hr., \$50 min.)				
☐ Plan Previously Approved, refer to #				
BUILDING PLAN APPROVAL:				
□ Review Not Required (construction cost less than \$15,0	000)			
☐ Plan Review for New Construction, Additions (fee is bas	sed on sq. ft. building cost: 0.00°	13 X Building Cost, \$100 min.)		
□ Plan Review for Alterations, Remodeling (fee when is not based on sq. ft. area: \$75/hr. \$100 min.)				
☐ Previously Approved, Plan#				
PHASED PLAN APPROVAL:				
□ Electrical □ Mechanical □ Plumbing □ Fi	re Suppression □ Gas Pipir	ng 🗆 Other		
SPECIAL INSPECTIONS: (Indicate special inspections require	d for this project per Chapter 17)			
$\Box$ Steel (Sec. 1705.2) $\Box$ Concrete (Sec. 1705.3) $\Box$	Masonry (Sec. 1705.4)	ood (Sec. 1705.5) Soils (Sec. 1705.6)		
☐ Driven deep foundations (Sec. 1705.7) ☐ Cast-in-pl	ace foundations (Sec. 1705.8)	☐ Helical pile foundations (Sec.1705.9)		
□ Special inspections for wind resistance (Sec. 1705.10) □ Special inspections for seismic resistance (Sec. 1705.11)				
☐ Testing and qualifications for seismic resistance (Sec. 170	05.12) ☐ Sprayed fire-resis	stant materials (Sec. 1705.13)		
☐ Mastic and intumescent fire-resistant coatings (Sec. 1705	.14)    Exterior insulation	n and finish systems (Sec. 1705.15)		
☐ Fire-resistant penetrations and joints (Sec. 1705.16) ☐ Special inspection for smoke control (Sec. 1705.17)				
☐ Other special inspections:				
V. Applicant Information				
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL THE FOLLOWING INFORMATION.	FEES AND CHARGES APPLIC	ABLE TO THIS APPLICATION AND MUST PROVIDE		
NAME	ADDRESS			
CITY STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)		
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTH THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AU THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED	THORIZED AGENT, AND WE AG	GREE TO CONFIRM TO ALL APPLICABLE LAWS OF		
Section 23a of the state construction code act of conspiring to circumvent the licensing requirer a residential building or a residential structure.  Signature of Applicant	nents of the state relating	to persons who are to perform work on		

Expiration of Permit: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00

City of Menominee, Building	Building Department Building Permit Application				ion
VI. Department Approval (Comple	ted by City)				
ADDRESS			PROPE	RTY NUMBER	
LAND-USE DEVELOPMENT & ENVIRONMENTAL CONTROLS					
	REQUIRED	NUMBER	DATE	APPROVED	FEE
A – Land Use Permit	□ Yes □ No				
B - Variance	□ Yes □ No				
C - Special Use Permit	□ Yes □ No				
D - Conditional Use Permit	□ Yes □ No				
E – Historic District	□ Yes □ No				
F – Fire District	□ Yes □ No				
G - Pollution Control	□ Yes □ No				
H - Noise Control	□ Yes □ No				
I – Soil Erosion	□ Yes □ No				
J – Flood Zone	□ Yes □ No				
K – Water Supply	□ Yes □ No				
L - Septic System	□ Yes □ No				
M – Other	□ Yes □ No				
	D. 441		AL FEE	\$	
	PLAN R	REVIEW & BUILDING	PERMITS		
USE GROUP		APPLICATIO	N FEE (non-refundab	le) \$	
TYPE OF CONSTRUCTION	ONSTRUCTION\$				
ROJECT AREA Sq. FtPLAN REVIEW FEE \$					
CONSTRUCTION COST \$	T \$BUILDING PERMIT FEE \$				
CONTRACTOR'S COST EST. \$	\$ C.O. FEE □ Yes □ No \$				
ASSIGNED PROJECT No	ECT NoTOTAL FEE \$				
APPROVAL SIGNATURE					
TITLE			DATE		

BC-201 (rev. July 2018)

Site or Plot Plan – Use this form	n or other scaled drawing	g of the project site	
			3.77
VII. Department Approval (Completed	by Code Enforcement Officer)		

VII. Department Approval (Completed by Code Enforcement Officer)				
APPROVAL SIGNATURE	PROJ#	DATE ISSUED		

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