

BUILDING PERMIT

City of Algonac

805 St. Clair River Drive, P.O. Box 454 Algonac, MI. 48001

City Office: (810) 794-9361 EXT 213

algbuild@cityofalgonac.org

1. JOB LOCATION

Street Address	Sub, Lot#, Building	Date of Application	
Applicants Legible Email Address *REQUIRED*		*ALL CORRESPONDENCES WILL BE EMAILED*	
Owner's Name		Driver's License #	
Owner's Address		State	Zip Code
Contact Person		Telephone Number	

2. DESCRIPTION OF WORK: Circle or fill in blanks for **EVERYTHING** that applies to your project. ***REQUIRED***

TYPE:	NEW BUILDING	ADDITION	ALTERATION	REPAIR	FIRE-REPAIR	MOBILE HOME
	AWNING	TENT	DECK	GARAGE	ROOFING	DEMOLITION
	SQ. FT.:		OTHER:			
POOL / SPA/ HOT TUB: ABOVE OR INGROUND	CONCRETE: REPLACEMENT OR NEW			FINISHED BASEMENT: SQ. FT. OR APPROX % FINISHED _____		
Gunite* Concrete* Fiberglass* Plastic*	Stairs* Front porch* Shed pad*	Rear porch* Garage Floor*	Side Porch*	BATH: Sink* Toilet* # Bedrooms:___	Tub* Shower* Jacuzzi* Wet bar* Kitchen* Fireplace*	
RESIDENTIAL:	SINGLE FAMILY	TWO OR MORE FAMILY		HOTEL/ MOTEL		
	No. of stories _____	No. of units _____		No. of units _____		
NON-RESIDENTIAL:	THEATER/ SOCIAL HALL		STORE	REPAIRS/ GAST STATION	OFFICE	CHURCH
	PUBLIC UTILITY		SCHOOL	HOSPITAL	OTHER _____	

ESTIMATED VALUE OF CONSTRUCTION: *REQUIRED*	DESCRIPTION OF WORK: *REQUIRED*
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3. CONTRACTOR INFORMATION (LICENSES & PROOF OF INSURANCE REQUIRED AT TIME OF SUBMITTAL)

Contractor Name		Driver's License		
Contractor Address		City	State	Zip Code
Telephone Number	Date of Birth	Federal Employer ID Number (or reason for exemption)		
Worker's Compensation Insurance (or reason for exemption)		MESC Employer Number (or reason for exemption)		
Contractor License Type		License Number	Expiration	

BY SIGNING THIS APPLICATION I 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 THE AUTHORIZED AGENT. WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE CITY OF ALGONAC. ALL INFORMATION ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

Section 23a of the state construction code act of 1972, Act No 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, prohibits a person from 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 subject to civil fines.

SIGNATURE OF APPLICANT (Homeowner must also sign affidavit - Item #4)

4. HOMEOWNER AFFIDAVIT

I hereby certify the work described on this building 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 building code and shall not be covered up or put into operation until it has been inspected and approved by the Building Inspector. I will cooperate with the Building Inspector and assume the responsibility to arrange for necessary inspections.

Signature of Homeowner	Date
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5. BUILDING PERMIT AND PLAN REVIEW FEES		Total
APPLICATION FEE (NON REFUNDABLE)		\$75.00
LICENSE REGISTRATION (IF APPLICABLE)		\$25.00
PLAN REVIEW FEES (NON REFUNDABLE)		
Single Family Residential (New or Addition)		\$300.00
Multi Family (New or Addition)		\$350.00
Non Residential (New or Addition)		\$350.00
Miscellaneous (Awning, Basement Finish, Concrete, Deck, Fire Repair, Gazebo, Interior Finish, Porch, Shed, Swimming Pool, ECT.)		\$75.00
** Make checks payable to "City of Algonac **		TOTAL DUE AT TIME OF APPLICATION
FOR BUILDING DEPARTMENT USE ONLY		
ADDITIONAL REVIEW FEES (IF APPLICABLE)		
Electrical		\$75.00
Mechanical		\$75.00
Plumbing		\$75.00
Sanitary Sewer Connection Fee		\$500.00
Sanitary Sewer Inspection Fee		\$75.00
Water Meter (3/4" or 1")		\$700.00
Water Tap		\$2,000.00
Water Capital Charge		\$2,500.00
VALUATION FEE OR		Gross Area x SF Construction Cost Per ICC Building Valuation Data Table x .0065
DECLARED VALUE (i.e. roof or deck)		Declared Project Value x .0065
INSPECTIONS		
Rough or open Borad (Roof) Inspection		\$75.00
Backfill Inspection		\$75.00
Comapaction/ Sand Inspection		\$75.00
Footing/Open Hole Inspection		\$75.00
Insulation Inspection		\$75.00
Additional Inspection		\$75.00
Final Inspection		\$75.00
Fine for work w/o permit (min \$50)		
** Make checks payable to "City of Algonac **		TOTAL DUE AT TIME OF PERMIT ISSUE
Use Group		Constrution Type
Referenced Construction Code		Occupancy Load
Total # Bedrooms	Sq. Footage	Variance Required?
Total # Baths	Zoning	Fire Suppression Required?
No work shall be started until the permit application has been filed with the Building Department. Installation shall conform to all applicable codes. No work shall be concealed until inspected.		
A permit remains valid as long as work is progressing and inspections are requested and conducted.		
A PERMIT WILL BE CANCELLED WHEN NO INSPECTIONS ARE REQUESTED OR CONDUCTED WITHIN 6 MONTHS OF THE DATE OF PERMIT ISSUANCE OR WITHIN 6 MONTHS OF THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED OR REINSTATED.		
READY FOR INSPECTION? Call 810-794-9361 x 1 or Email ALGBUILD@CITYOFALGONAC.ORG at least 24 hours in advance.		
Reviewed & Approved by: _____		Date: _____