

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 <u>EVERYTHING</u> 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 Gunitite* Concrete* Fiberglass* Plastic*	CONCRETE: REPLACEMENT OR NEW Stairs* Front porch* Rear porch* Side Porch* Shed pad* Garage Floor*		FINISHED BASEMENT: SQ. FT. OR APPROX % FINISHED _____ BATH: Sink* Toilet* Tub* Shower* Jacuzzi* # Bedrooms:___ Wet bar* Kitchen* Fireplace*	
RESIDENTIAL:	SINGLE FAMILY TWO OR MORE FAMILY No. of stories _____ No. of units _____		HOTEL/ MOTEL 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*	
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	

5. BUILDING PERMIT AND PLAN REVIEW FEES		Total												
APPLICATION FEE (NON REFUNDABLE)	\$75.00	\$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													
<table border="1"> <tr> <td>Use Group</td> <td>Construction Type</td> </tr> <tr> <td>Referenced Construction Code</td> <td>Occupancy Load</td> </tr> <tr> <td>Total # Bedrooms</td> <td>Sq. Footage</td> </tr> <tr> <td>Total # Baths</td> <td>Zoning</td> </tr> <tr> <td></td> <td>Variance Required?</td> </tr> <tr> <td></td> <td>Fire Suppression Required?</td> </tr> </table>			Use Group	Construction Type	Referenced Construction Code	Occupancy Load	Total # Bedrooms	Sq. Footage	Total # Baths	Zoning		Variance Required?		Fire Suppression Required?
Use Group	Construction Type													
Referenced Construction Code	Occupancy Load													
Total # Bedrooms	Sq. Footage													
Total # Baths	Zoning													
	Variance Required?													
	Fire Suppression Required?													
<p>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.</p> <p>A permit remains valid as long as work is progressing and inspections are requested and conducted.</p> <p>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.</p> <p>READY FOR INSPECTION? Call 810-794-9361 x 1 or Email ALGBUILD@CITYOFALGONAC.ORG at least 24 hours in advance.</p>														
<p>Reviewed & Approved by: _____ Date: _____</p>														