

BUILDING PERMIT APPLICATION

CITY OF WAKEFIELD
 509 SUNDAY LAKE STREET
 WAKEFIELD, MI 49968
 www.cityofwakefield.org

1. CONSTRUCTION LOCATION: (must be specific, we need to be able to find your project)

ADDRESS _____
Number, Street, City, State, Zip

This project is located between _____ and _____
Street/Road Street/Road

Special directions _____

CITY: _____ PROPERTY CODE #: **2753-** - -

2. PROPERTY OWNER OR LESSEE:

NAME _____

ADDRESS _____
Number, Street, City, State, Zip

HOME PHONE _____ WORK PHONE _____ FAX _____

3. CONTRACTOR INFORMATION (keep in mind that all contractors offering to do work which totals \$600 or more for labor and materials must have a State of Michigan license. The following information is required) If you need more space than provided you may include a separate sheet of paper.

NAME OF CONTRACTOR _____

ADDRESS _____
Number, Street, City, State, Zip

PHONE _____ FAX _____

LICENSE NUMBER _____ EXPIRATION DATE _____

Federal employee ID number or reason for exemption _____

Workers compensation insurance carrier or reason for exemption _____

MESC employer number or reason for exemption _____

ZONING REQUIREMENTS

The City of Wakefield is not responsible in determining actual property lines. Plat Maps and Zoning Codes are available at the City Clerk's Office and on the City's Website. If you are uncertain on Zoning Codes, please verify them prior to beginning construction.

4. ARCHITECT OR ENGINEER INFORMATION (when applicable)

NAME OF ARCHITECT OR ENGINEER _____

ADDRESS _____
Number, Street, City, State, Zip

PHONE _____ FAX _____

5. TYPE OF COMMERCIAL PROPERTY IMPROVEMENT:

Use Group _____ Construction Type _____ Occupant Load _____ No. of stories _____

_____ Addition, used as _____ Alteration
_____ New Building, used as _____ Sign

How many off street parking spaces: _____ enclosed _____ outdoors

THE PROJECT WILL CONSIST OF: (separate permits are required for each roof structure)

- _____ Stick built home
 - _____ with attached garage
- _____ State of Michigan approved manufactured home, Serial numbers (when available) _____
 - _____ with attached garage
- _____ HUD approved mobile/doublewide, Title numbers (when available) _____
 - _____ With attached garage
- _____ Addition
- _____ Alteration/remodel
- _____ Deck /Porch
 - _____ with a roof structure _____ without a roof structure
- _____ Garage
 - _____ detached _____ attaching to existing residence
- _____ Pole building
- _____ Storage building/utility building/accessory building—frame construction
- _____ Pool
 - _____ below ground _____ above ground
- _____ Fire job
- _____ Pre-Sale Inspection
- _____ Demolition, most recent use _____

6. PLEASE ANSWER THE FOLLOWING QUESTIONS:

The foundation will be: _____ full basement _____ crawl space _____ floating slab
_____ pole _____ piers _____ trench
_____ poured concrete walls _____ block walls _____ wood

The principal type of frame will be: _____ wood _____ post _____ masonry
_____ structural steel _____ other

The principal type of heating fuel: _____ natural gas _____ propane gas _____ fuel oil
_____ electric _____ other

The type of water supply is: _____ private _____ public system

The type of sewage disposal is: _____ private _____ public system

The number of bedrooms involved: _____

The number of bathrooms involved: _____ full _____ half _____ unisex
(Commercial)

Will this project have an elevator? _____ yes _____ no

Will this project have a fire suppression system? _____ yes _____ no

Will this project have a fireplace? _____ yes _____ no

If yes, what kind? _____ masonry
 _____ pre-manufactured zero-clearance
 _____ pre-manufactured gas burning

STRUCTURAL ELEMENTS:

This project will use: _____ truss' spaced _____" on center (provide manufacturers engineering)
 _____ rafters _____" x _____" spaced _____" on center

Exterior walls: _____ 2" x 4" spaced _____" on center
 _____ 2" x 6" spaced _____" on center

Floor joists: _____ 2" x 6" spaced _____" on center
 _____ 2" x 8" spaced _____" on center
 _____ 2" x 10" spaced _____" on center
 _____ 2" x 12" spaced _____" on center
 _____ TJI's (provide manufacturers engineering)

Support Columns: _____ wood _____ x _____ spaced _____" on center
 _____ steel _____ diameter _____ other spaced _____" on center

7. DIMENSIONS OF PROJECT:

OFFICE USE ONLY/FEEES FOR BUILDING PLAN REVIEW

Base fee					
Basement, unfinished	_____	x _____	= _____	sq. ft.	x _____ = _____
Basement, finished	_____	x _____	= _____	sq. ft.	x _____ = _____
_____ cement slab _____ crawl space					
Main floor	_____	x _____	= _____	sq. ft.	x _____ = _____
Upper level or loft area	_____	x _____	= _____	sq. ft.	x _____ = _____
Garage	_____	x _____	= _____	sq. ft.	x _____ = _____
_____ attached _____ detached					
Pole building	_____	x _____	= _____	sq. ft.	x _____ = _____
Utility/accessory building	_____	x _____	= _____	sq. ft.	x _____ = _____
Alteration/remodel	_____	x _____	= _____	sq. ft.	x _____ = _____
Deck, with a roof structure	_____	x _____	= _____	sq. ft.	x _____ = _____
Without a roof structure	_____	x _____	= _____	sq. ft.	x _____ = _____
Porch, with a roof structure	_____	x _____	= _____	sq. ft.	x _____ = _____
Without a roof structure	_____	x _____	= _____	sq. ft.	x _____ = _____
Pool	_____	x _____	= _____	sq. ft.	x _____ = _____
Fire job	_____	x _____	= _____	sq. ft.	x _____ = _____
Other	_____	x _____	= _____	sq. ft.	x _____ = _____

TOTAL SQUARE FOOTAGE OF PROJECT _____ SQ.FT.

YOUR ESTIMATED COST OF THIS PROJECT \$ _____
 (should include building, electrical, mechanical & plumbing)

BUILDING PERMIT AND CODE QUESTIONS:

DONALD "BUTCH" SAARI
BUILDING INSPECTOR
(906) 932-5979
(906) 364-1277

8. Any Construction within 500 feet of any water body, any construction area or land clearing work larger than one acre of land. A **GOGEBIC COUNTY SOIL EROSION PERMIT IS REQUIRED.**

My project is approximately _____ feet from a lake, river, stream or county drain. My soil erosion permit number is _____.

The bottom of the lowest horizontal structural member of this project will be approximately _____ feet above summer lake level.

This project is in a flood hazard area; my DEQ permit number is _____. The 100 year floodplain elevation or rise at this location is _____ determined by _____.

Since my project is in a floodplain hazard area, I understand that certain building restrictions and regulations will apply. Before construction begins, I must have a registered surveyor create an on site bench mark, upon completion and before occupancy of this project I must submit a certificate of as-built elevation from a registered land surveyor.

Signature _____ Date _____

10. APPLICANT INFORMATION:

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information.

I hereby certify that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/hers authorized agent and I agree to conform to all applicable laws of the State of Michigan. All information submitted 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 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. (This means, it is illegal in the State of Michigan to hire or use unlicensed people to perform work for you.)

DATE _____

SIGNATURE OF APPLICANT (Be sure you understand the above)

ADDRESS _____

Number, Street, City, State, Zip

PHONE _____

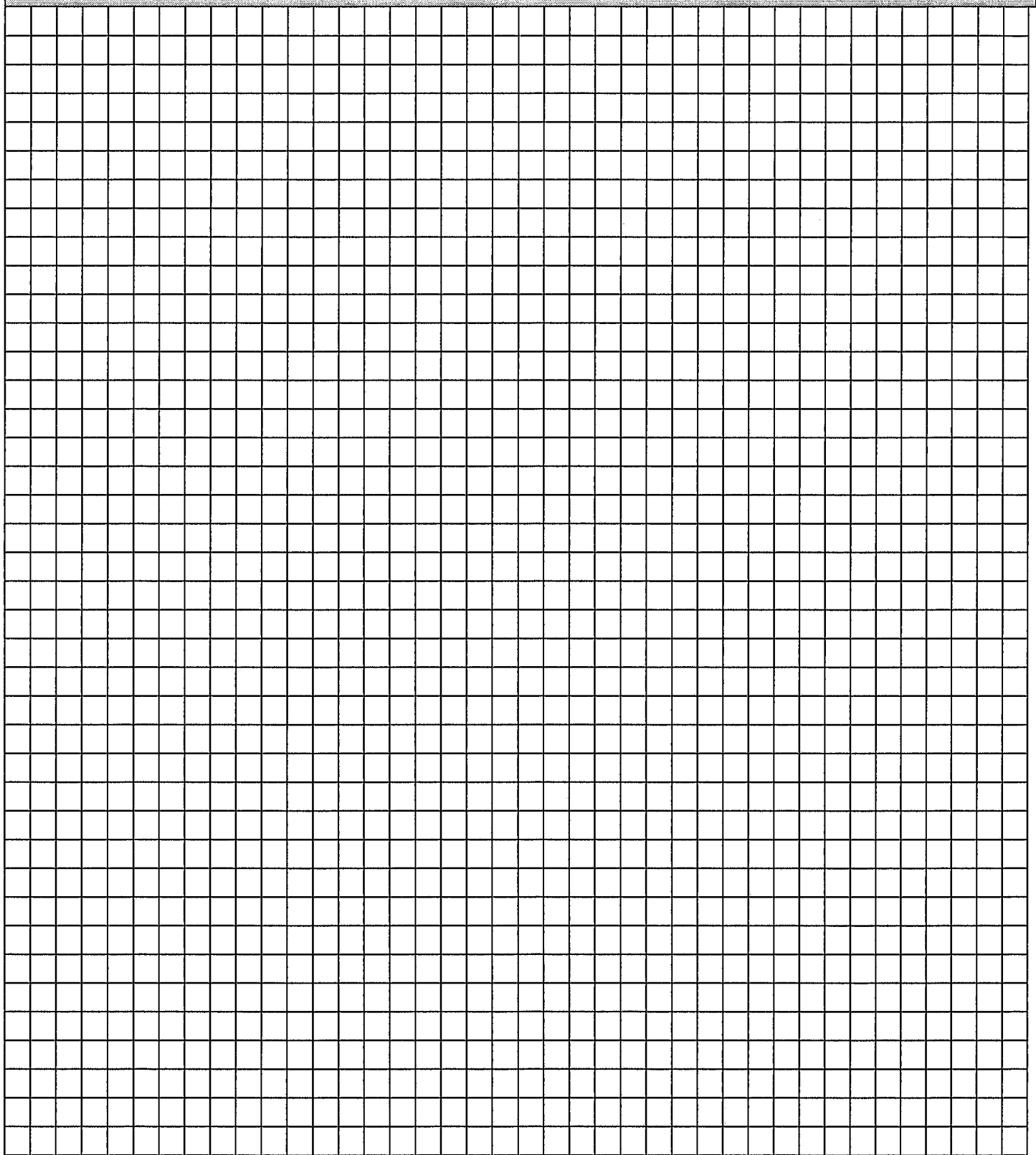
11. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS INFORMATION:

The building official of the City of Wakefield has completed the necessary review on the above application along with submitted documents and is approving that the permit be issued.

BUILDING OFFICIAL'S

SIGNATURE _____ DATE _____

COMMENTS:



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 1 year days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 1 year after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 1 YEAR 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.**