BUILDING PERMIT APPLICATION

HOLTON TOWNSHIP

PERMIT NO.	
ISSUE DATE	

6511 Holton Whitehall Road P.O. Box 328 Holton, MI 49425 (231) 821-2168

CIRCLE TYPE OF WORK: New Construction/Remodel Residential/Commercial Repair/Demolition/Other

All information and fees are required prior to permit issuance

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THIS IS YOUR P	FRIVIII WHEN	APPROVED	KY IHE	ADMINISTR	ATIVE AUTHORITY

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START DATE	PERMIT HOLDERS ARE RESPONSIBLE FOR SCHEDULING INSPECTIONS A MINIMUM OF 24 HOURS IN ADVANCE				PERMITS VALID FOR 180 DAYS		
CONTRACTOR	ADDRESS				PHONE		
FED.EMP.ID.NO.	WORKER'S COMP. INS. NO.				MESC EMP. NO.		
REASON FOR EXEMPTION OF ABOVE (IF APP.)	LICENSE NO./Expiration Date				EMAIL ADDRESS		
JOB ADDRESS			OWNER NA	ME	& ADDRESS		
JOB NOONESS			OWNERNA	IVIL	C ADDITESS		
PARCEL#:			PHONE #:				
Fire Suppression Contractor				Arch	chitect		
Mason		DEQ Permit Fill, Excavation: Yes/No		Eros	Erosion Control Permit: Yes/No		
Construction Type		Use Group		Zoni	Zoning		
The determination of value or value	ation und	l der any of the provisi	ons of the Code for Build	ing P	ermit Fees shall be	made by the	
Building Official. The value or value		_			_	ased on current	
replacement costs. Determination	i for value	e for tax purposes is r	nade by the City Assessor	r. V	ALUE:		
Description of work:							
		PLIBLIC AC	T NUMBER 135				
Section 23a of the State Construction	Code Act o			ng Se	ction 125, 1523a of t	he Michigan Compiled	
Laws, prevents a person from conspir	-			lating	to persons who are	to perform work on a	
residential building or a residential str THE APPROVAL OF PLANS AND SPECIF			-	ON OI	F THE BUILDING COD	E, FIRE CODE, OR ANY	
OTHER CITY ORDINANCE OR STATE		R DOES IT GUARANTE	E THAT ADDITIONAL CON	STRU	CTION WOULDN'T B	E REQUIRED TO THE	
STRUCTURE TO MEET THE CURRENT C	ODES.	HOMFOWN	IER'S AFFIDAVIT				
I hereby certify the work described on		it application shall be d	lone by myself in my own si				
occupy. All work shall be installed in							
responsibility to arrange for necessal contractor AND an additional fee may			ice. "NOTE: if violation p	ersist	s, you may be requi	red to nire a licensed	
NOTE: Plan fees are as	sessed for		GNATURE OF OWNER I any residential construction	on rec	uiring an architectur	DATE al seal.	
**ALL INSPECTIONS I		<u> </u>					
INSPECTOR'S COMMENTS:					Building Fee		
					Plan Review		
					Other		
*Blower door test required for nev	w constru	ction & additions.			TOTAL FEE		
CICNATURE OF CONTRACTOR		DATE	ADDUCATION ADDO	0.74	LCICNATURE		
SIGNATURE OF CONTRACTOR		DATE	APPLICATION APPR	OVA	L SIGNA I UKE	DATE	