

Somerset Township Hall  
 12715 E. Chicago Rd  
 P.O Box 69  
 Somerset Center MI 49282

**APPLICATION for PLAN EXAMINATION and BUILDING PERMIT**

**IMPORTANT - Applicants Complete All Items in Sections: I, II, III, IV, V and VII**

<b>I. LOCATION of BUILDING</b>	Location (Street Number and Street Name)			Zoning District
	Names of Cross Streets Between _____ and _____			
	Subdivision	Lot Number	Block	Lot Size

**II. TYPE and COST of BUILDING - All Applicants Complete Parts A through D**

**A. TYPE of IMPROVEMENT**

1  New Building

2  Addition (If residential, enter number of new housing units added, if any, in Part D, 13.)

3  Alteration (See number 2 above)

4  Repair, Replacement

5  Wrecking (If multifamily residential, enter number of units in building in Part D, 13.)

6  Moving (Relocation)

7  Foundation only

**D. PROPOSED USE**  
For "Wrecking" most recent use

<b>Residential</b>	<b>Nonresidential</b>
12 <input type="checkbox"/> One Family	18 <input type="checkbox"/> Amusement, Recreational
13 <input type="checkbox"/> Two or more Family <i>Enter number of units</i> _____	19 <input type="checkbox"/> Church, other Religious
14 <input type="checkbox"/> Transient Hotel, Motel or Dormitory <i>Enter number of units</i> _____	20 <input type="checkbox"/> Industrial
15 <input type="checkbox"/> Garage	21 <input type="checkbox"/> Parking Garage
16 <input type="checkbox"/> Carport	22 <input type="checkbox"/> Service Station, Repair Garage
17 <input type="checkbox"/> Other (Specify) _____	23 <input type="checkbox"/> Hospital, Institutional
	24 <input type="checkbox"/> Office, Bank, Professional
	25 <input type="checkbox"/> Public Utility
	26 <input type="checkbox"/> School, Library, other Educational
	27 <input type="checkbox"/> Stores, Mercantile
	28 <input type="checkbox"/> Tanks, Towers
	29 <input type="checkbox"/> Other (Specify) _____

**B. OWNERSHIP**

8  Private (Individual, Corporation, Nonprofit Institution, Etc.)

9  Public (Federal, State, Local Government)

**C. COST** (Omit Cents)

10 Cost of Improvement \$ \_\_\_\_\_  
To be installed but not included in the above cost:

a. Electrical \$ \_\_\_\_\_

b. Plumbing \$ \_\_\_\_\_

c. Heating, Air Conditioning \$ \_\_\_\_\_

d. Other (Elevator, etc.) \$ \_\_\_\_\_

11 TOTAL Cost of Improvement \$ \_\_\_\_\_

**Nonresidential** - Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**III. SELECTED CHARACTERISTICS of BUILDING - For New Buildings and Additions complete Parts E through L, for Wrecking, complete only Part J, for all others skip to IV.**

**E. PRINCIPAL TYPE of FRAME**

30  Masonry (Wall Bearing)

31  Wood Frame

32  Structural Steel

33  Reinforced Concrete

34  Other (Specify) \_\_\_\_\_

**G. TYPE of SEWAGE DISPOSAL**

40  Public or Private Company

41  Private (Septic Tank, etc.)

**J. DIMENSIONS**

48 Number of Stories \_\_\_\_\_

49 Total Sq Ft of Floor Area, All Floors, Based on Exterior Dimensions ... \_\_\_\_\_

50 Total Land Area, Sq. Ft. ... \_\_\_\_\_

**E. PRINCIPAL TYPE of HEATING FUEL**

35  Gas

36  Oil

37  Electricity

38  Coal

39  Other (Specify) \_\_\_\_\_

**H. TYPE of WATER SUPPLY**

42  Public or Private Company

43  Private (Well, Cistern)

**K. NUMBER of OFF STREET PARKING SPACES**

51 Enclosed \_\_\_\_\_

52 Outdoors \_\_\_\_\_

**I. TYPE of MECHANICAL**

Will there be air conditioning?

44  Yes 45  No

Will there be an elevator?

46  Yes 47  No

**L. RESIDENTIAL BUILDINGS ONLY**

53 Number of Bedrooms \_\_\_\_\_

54 Number of Bathrooms

Full \_\_\_\_\_

Partial \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

#### IV. IDENTIFICATION

Homeowner Permits Must List All Subcontractors and Their License Number

##### A. OWNER

Name		Telephone Number (      )	
Address	City	State	Zip Code

##### B. ARCHITECT or ENGINEER

Name		Telephone Number (      )	
Address	City	State	Zip Code

##### C. CONTRACTOR

Name			Telephone Number (      )	
Address		City	State	Zip Code
License Number	Expiration Date	Social Security Number	Federal Employer ID Number (or reason for exemption)	
Workers Compensation Insurance Carrier (or reason for exemption)			MESC Employer Number (or reason for exemption)	

#### V. APPLICANT INFORMATION

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

Name		Telephone Number (      )	
Address	City	State	Zip Code
Federal Employer ID Number / Social Security Number			
I hereby 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 his authorized agent, and we 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. I acknowledge receipt of and agree to comply with the Hillsdale County Building Guide.			
Fee Enclosed:			
Signature of Applicant		Date	
Section 23A of the State Construction Code Act of 1972, Act Number 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.			