

City Hall 208 North First Avenue Alpena, Michigan 49707 www.alpena.mi.us

Building Permit Application

Project Address		Zoning District		
Owner Name		Phone		
Address		E-mail		
Contractor Name (if applicable)		Phone		
Address		E-mail		
State of MI License # (Required)		Expiration Date (Required)		
FEIN - or reason for exemption (Required upon License Expiration)	Unemployment Insur	rance Agency Number — or reason for exemption		
Workers Comp Insurance Carrier - or reason for exempt	ion (Required upon License I	Expiration or Change in Carrier)		
Project Engineer (if applicable)		Phone		
Address		E-mail		
Project Architect (if applicable)		Phone		
Address		E-mail		
Type of Improvement: New Structure Addition Alteration Repair Change in Use Demolition Sign Premanufactured				
Use Group:				
Residential: Buildings Regulated by Michigan Residential Code				
One Family 2+ Family – Unit Count Attached Garage Detached Garage				
Townhouse – Unit Count Other				
Buildings Regulated by Michigan Building Code or Michigan Rehab Code for Existing Buildings				
Current Occupancy Group Proposed Occu				
Type of Construction	Fire Suppressic	n? Yes No		
Project Valuation: Project Description	ription:			
\$				
☐ Valuation is for Material Only				
☐ Valuation is for Material & Labor				
Complete for New Structures or Additions: Residential Only:				
Site Area: Sq Ft Area of Site Occupied by Current & Proposed Structures: Sq Ft				
Total Lot Coverage %				



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Work B	Being Done by:				
l assum 230 M	ne all responsibility and liability for said CL 125.1523a, prohibits a person from o s who are to perform work on a resider	s to be done by myself. The work is to be done on my p work. Section 23a of the State construction code act of conspiring to circumvent licensing requirements of the ntial building or a residential structure. Violators of sect	f 1972, 1972 PA State relating to		
contrac	, , , , , , , , , , , , , , , , , , , ,	osed work is authorized by the owner of record and that to submit this application as their authorized agent. Ov aws of the State of Michigan.	• • • • • • • • • • • • • • • • • • • •		
	RSTAND AND AGREE TO COMPLY WITH DING PERMIT:	I THE REQUIREMENTS OUTLINED BELOW AS A CONDITI	ON OF OBTAINING		
1. All information submitted on this application is accurate to the best of the applicant's knowledge					
2.	2. All work to be done is in compliance with the 2015 residential or 2015 building code, as applicable				
3. Existing window replacements or new construction MUST have a minimum U factor of 0.32 or less					
4. 24-48 hour advanced notice required for most inspections					
5.	5. It is the applicant's responsibility to call for inspections as circled on the weather card				
6.					
	work in order to perform inspections				
7.					
8.					
construction or work is suspended or abandoned for a period of six months at any time after work begins					
9.					
10. It is illegal to use and/or occupy any structure requiring a certificate of occupancy due to new construction					
11. Separate permits are required for electrical, plumbing, heating, ventilating, or air conditioning					
11. Separate permits are required for electrical, plumbing, meaning, ventilating, or all collutioning					
Applica	int Name	Applicant Signature	Date		

Projects may require a plot plan or site plan for zoning review prior to obtaining a building permit; contact the Building Department for more information.

Construction which includes new structures, alterations, additions, etc. require drawings of the structural work to be completed; drawings may include the inside or outside layout, door locations, window locations, fastening methods, and a sketch of the wall section (i.e., footing size, depth, foundation type, floor, wall, roof).