BUILDING DEPARTMENT
6740 DIXIE HIGHWAY
BRIDGEPORT, MI. 48722

BRIDGEPORT CHARTER TOWNSHIP
BUILDING PERMIT APPLICATION

Application Number: BP - _____

EMAIL: rwheatley@bridgeportmi.org
PHONE: (989) 777-0940 Ext. 215
FAX: (989) 777-4802

REQUIRED INFORMATION Date: *

PROPERTY *	Address of work: Zoning District: Between: And Parcel/Tr #:
PROPERTY OWNER *	Name: Phone: Email: Address: City: State: Zip:
CONTRACTOR **If Applicable ***	Name/Business: Phone: Email: Address: City: State: Zip: License #: Exp.:
ARCHITECT or ENGINEER **If Applicable ***	Name: Phone: Email: Address: City: State: Zip: License #:

BUILDING INFORMATION

TYPE OF WORK: *

- ☐ Build//Finish
- ☐ Addition
- ☐ Interior Alteration
- ☐ Exterior Alteration
- ☐ Change of Occupancy
- ☐ Demolition of _____
- ☐ Relocation of _____
- ☐ Repair(s) to _____
- ☐ Replacement of_____
- ☐ Other_____

- ☐ New
- ☐ Existing
- ☐ Portion(s) of existing
- ☐ Foundation only
- ☐ Other: _____

- ☐ Commercial Building
- ☐ Single Family Dwelling
- ☐ Tenant Space
- ☐ Deck
- ☐ Covered Porch
- ☐ Pole Building
- ☐ Sign
- ☐ Garage
- ☐ Roof
- ☐ Windows Number_____
- ☐ Siding
- ☐ Pool

FLOODPLAIN: * ☐ YES ☐ NO

DEQ Permit #: _____

Approval: _____

BUILDING HEIGHT/AREA: *

Max. Height Above Grade: _____

Stories above Grade: _____

Max. Area per Floor: _____

BUILDING CONSTRUCTION TYPE: *

- ☐ 5B - Combustible/unprotected
- ☐ 5A - Combustible/protected
- ☐ 4 - Heavy Timber
- ☐ 3B - Non-combustible/combustible Unprotected
- ☐ 3A - Non-combustible/combustible protected
- ☐ 2B - Non-combustible/Unprotected
- ☐ 2A - Non-combustible/protected
- ☐ 1B - Non-combustible/Unprotected
- ☐ 1A - Non-combustible/protected

Total Floor Area: _____SF
Area by Use:

Use: _____ SF: _____

Use: _____ SF: _____

Is this building residential rental property? * ☐ No ☐ Yes # Units_____

USE GROUPS: *

- ☐ A-1 Assembly - theaters, etc.
- ☐ A-2 Assembly - nightclubs, bars, restaurants, etc.
- ☐ A-3 Assembly – churches, libraries, etc.
- ☐ A-4 Assembly - indoor sporting facilities
- ☐ A-5 Grandstands, stadiums, outdoor sports, etc.
- ☐ B Business – Professional services, banks, etc.
- ☐ E Educational -
- ☐ F-1 Factory and industrial - moderate hazard
- ☐ F-2 Factory and industrial - low hazard
- ☐ H-1 High hazard - detonation hazards
- ☐ H-2 High hazard - deflagration hazards
- ☐ H-3 High hazard - physical hazards – consumer fireworks
- ☐ H-4 High hazard - health hazards – highly toxic materials
- ☐ H-5 Hazardous production materials – HPM
- ☐ I-1 Institutional - supervised residential care
- ☐ I-2 Institutional - incapacitated, hospital, nursing home
- ☐ I-3 Institutional - restrained, prisons
- ☐ M Mercantile – retail stores
- ☐ R-1 Residential – transient, hotels, motels, boarding houses
- ☐ R-2 Residential – non-transient, apartments, live -work units
- ☐ R-3 Residential - 1 and 2 family and townhouses
- ☐ R-4 Assisted living – 24 hour custodial care (6-16 occ.)
- ☐ S-1 Storage - moderate hazard, motor vehicle repair
- ☐ S-2 Storage - low hazard, noncombustible materials
- ☐ U Utility - miscellaneous, garages, fences, sheds
- ☐ Mixed Use
- ☐ Incidental Use
- ☐ Accessory Occupancies

BUILDING CHARACTERISTICS: *

Foundation: Basement: ☐ Poured ☐ Block ☐ Other:_____
Crawl Space: ☐ Poured ☐ Block ☐ Other:_____
Foundation Wall Thickness: ☐ 6 inch ☐ 8 inch ☐ 10 inch ☐ 12 inch ☐ Brick ledge

Garage: ☐ Yes ☐ No Number of Bedrooms: _____ Number of Bathrooms: _____

Building Frame: ☐ Wood ☐ Structural steel ☐ Masonry ☐ Reinforced Concrete ☐ Other
Exterior Wall Thickness: ☐ 4 inch ☐ 6 inch ☐ 8 inch ☐ Other: _____

Heating Fuel: ☐ Natural gas ☐ LP ☐ Electricity ☐ Oil ☐ Other: _____
Air Conditioning: ☐ Yes ☐ No Fire Suppression System: ☐ Yes ☐ No
Fireplace ☐ Masonry ☐ Pre-Manufactured ☐ Rumford ☐ Gas ☐ Wood Insert

Water Supply: ☐ City Water ☐ Well Sewage Disposal: ☐ City Sewer ☐ Septic System

FEES: Building Permit Fee: $_____

Cert. of Occupancy: $_____

Plan Review Fee: $_____

Zoning Permit: $_____

Bond: $325 or $750 $_____
On permits over $100.00

Total $_____ ☐ Cash ☐ Check #: _____

OVER

DESCRIPTION OF WORK: *

_____

_____

VALUE OF WORK - Includes Mechanical, Electrical, Plumbing and Labor: * $_____

PURSUANT TO PUBLIC ACT OF 135 OF 1989 ALL BUILDING PERMIT APPLICANTS MUST FILL OUT THIS SECTION *

1. Driver's License #: _____ 2. Workers Compensation: _____

3. Insurance Carrier: _____

4. Tax Id. # _____ 5. MESC # Unemployment Agency # _____ 6. Homeowner - N/A ☐

SECTION 23a of the State Construction Codes Act of 1972, 1972 PA 230, MCL 125.1523a, 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 subjected to civil fines.

A PERMIT WILL BE CANCELED WHEN NO INSPECTIONS ARE REQUESTED OR CONDUCTED WITHIN 180 DAYS OF ISSUANCE OR THE DATE OF PREVIOUS INSPECTION. CANCELED PERMITS CAN NOT BE REFUNDED AND MAY BE REINSTATED FOR $65.00 PLUS EACH INSPECTION REQUIRED.

* Initial here to verify this Item has been read. ☐

HOMEOWNERS AFFIDAVIT: I hereby certify that I am the bona fide homeowner of the above property which is a single-family residence and not for rent. I am familiar with the provisions of the applicable ordinances and State Building Codes of Michigan. I realize that in signing this application, I assume the responsibility of a licensed contractor for the work mentioned in this permit. I agree to notify the Building Department after each phase of work is completed so that the Department may make its required inspection(s). I further agree to keep all portions of this work exposed until approved by the inspector(s).

Violation Penalties: Any person who shall violate any provision of the Ordinance or shall fail to comply with any of the requirements the State of Michigan Building and Residential Codes shall be subject to Municipal Civil Infractions and fines.

_____

Signature (Homeowners Only) * Printed Name and Address * Date *

***Contractor,** I hereby Certify all information on this application is accurate to the best of my knowledge. I further Certify compliance with MCL 125. 1510(2).

_____ _____
Signature Date

_____ _____
Print Name of Applicant Title

_____
Company Name

***I, Owner, or person acting as owner's agent,** I hereby Certify all information on this application is accurate to the best of my knowledge. I further Certify compliance with MCL 125.1510(2).

_____ _____
Signature Date

_____
Print Name of Applicant

If Owner's signature is by Contractor or its representative, Contractor warrants and represents that it is an authorized agent for Owner for purposes of obtaining this permit. *(NOTE: Contractor is NOT allowed to act as agent for Owner if Contractor is in non-compliance status on other permits.)*

MUST BE SUBMITTED: THREE (3) SETS OF FULL PLANS FOR MULTI-FAMILY, COMMERCIAL, INDUSTRIAL PROJECTS.
TWO (2) SETS OF FULL PLANS FOR RESIDENTIAL PROJECTS.

OFFICE USE ONLY

	REQUIRED	APPROVED BY	DATE
1. ZONING:	_____ Y / N		
2. DRIVEWAY PERMIT/ADDRESS:	_____ Y / N		
3. FLOOD PLAIN DOCUMENTATION:	_____ Y / N		
4. WASTE WATER/SEPTIC:	_____ Y / N		
5. PUBLIC WATER/WELL:	_____ Y / N		
6. SOIL EROSION:	_____ Y / N		
7. ELECTRICAL PERMIT:	_____ Y / N		
8. MECHANICAL PERMIT:	_____ Y / N		
9. PLUMBING PERMIT:	_____ Y / N		
10. FIRE:	_____ Y / N		

DOCUMENTS: ☐ Contractor Registered ☐ Copy of Contract ☐ Site plan ☐ Wall cross section ☐ Plans & Documents ☐ Energy compliance ☐ Seal

Notes: _____

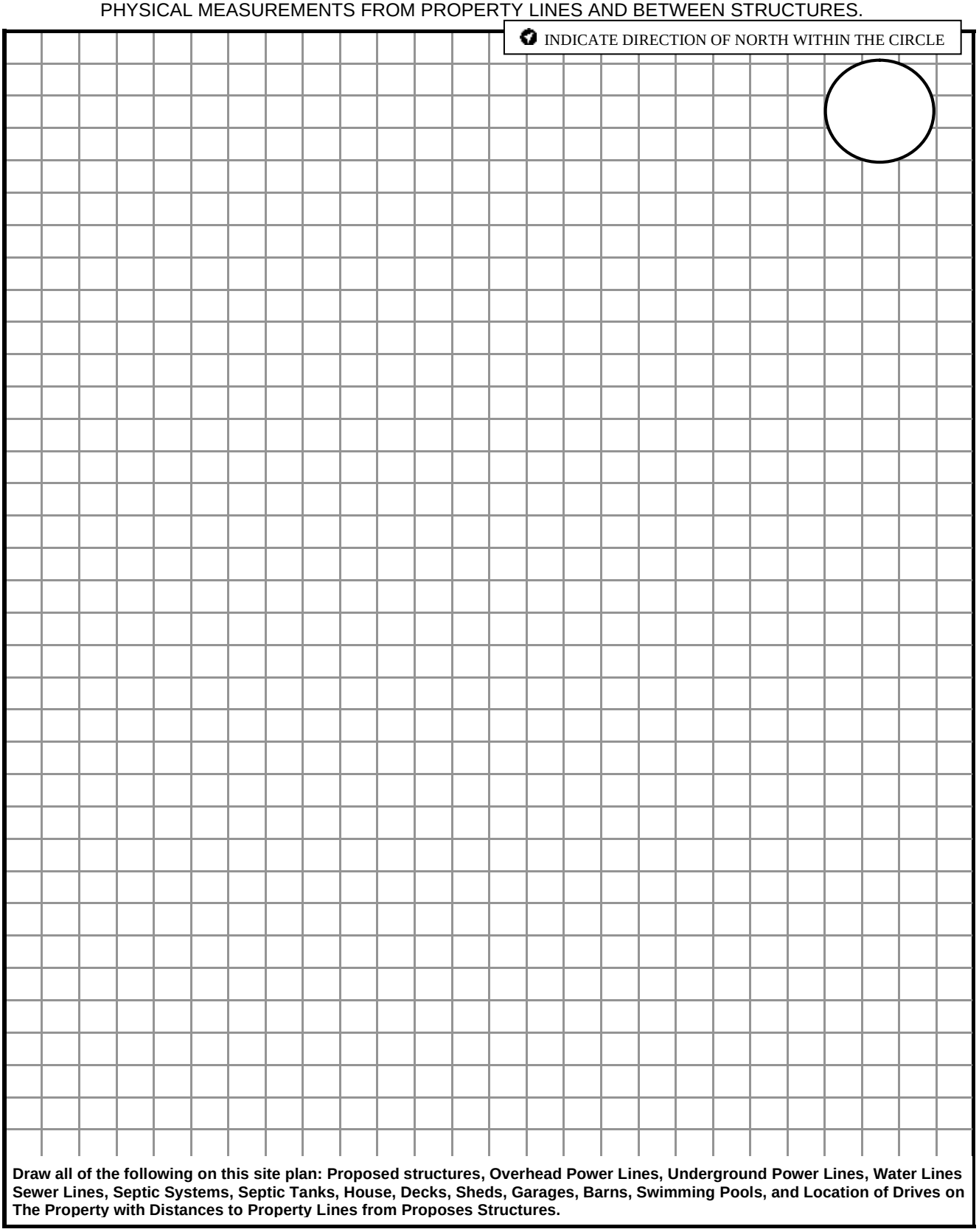
_____

Approval: Date: Building Permit Application No.: BP

This department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs.
If you require accommodations under the Americans with Disabilities Act you may make your needs known to this agency

OVER

SITE PLANS ARE REQUIRED FOR ALL BUILDING PERMIT APPLICATIONS. BORDERS OF THIS GRID ARE CONSIDERED YOUR PROPERTY LINES. INDICATE THE LOCATION OF ALL STRUCTURES WITH PHYSICAL MEASUREMENTS FROM PROPERTY LINES AND BETWEEN STRUCTURES.



Draw all of the following on this site plan: Proposed structures, Overhead Power Lines, Underground Power Lines, Water Lines Sewer Lines, Septic Systems, Septic Tanks, House, Decks, Sheds, Garages, Barns, Swimming Pools, and Location of Drives on The Property with Distances to Property Lines from Proposes Structures.

SAVE & ATTACH TO AN EMAIL TO rwheatley@bridgeportmi.org