



Building Permit Application

Marathon Township Building Department • 4585 Pine St. • PO Box 457 • Columbiaville, MI 48446
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Job Site _____ N S E W Side of Road

Cross Roads _____ and _____

Permit To: New Alter/Remodel Demo/Raze Code Compliance

Other (describe): _____

Permit To:

<input type="checkbox"/> Single-Family Dwelling	<input type="checkbox"/> Single-Family w/Attached Garage
<input type="checkbox"/> Addition	<input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage
<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Deck/Porch <input type="checkbox"/> Pre-Manufactured
<input type="checkbox"/> Garage w/Breezeway	<input type="checkbox"/> Sign <input type="checkbox"/> Pool
<input type="checkbox"/> Commercial/Industrial	<input type="checkbox"/> Other _____

Permit To:		
Foundation Type	Construction Information	Required Permits
<input type="checkbox"/> Basement Block/Foam	Deck Square Footage _____	<input type="checkbox"/> Septic _____
<input type="checkbox"/> Basement Poured	Accessory Building Sq. Ft. _____	<input type="checkbox"/> Sewer _____
<input type="checkbox"/> Basement Wood/Steel	Building Height _____	<input type="checkbox"/> Driveway _____
<input type="checkbox"/> Reinforced Mat	Living Area Sq. Ft. _____	<input type="checkbox"/> Soil Erosion _____
<input type="checkbox"/> 42" Pole Footing	Garage Sq. Ft. _____	<input type="checkbox"/> Flood Plain _____
<input type="checkbox"/> Crawl Space Block	Number of Stories _____	<input type="checkbox"/> Well _____
<input type="checkbox"/> Crawl Space Wood	Number of Bedrooms _____	<input type="checkbox"/> Wetlands _____
<input type="checkbox"/> Piers	Number of Bathrooms _____	
<input type="checkbox"/> OTHER _____	Masonry Fireplace _____	
	Masonry Exterior Finishes _____	

Estimated Value of Construction:

\$ _____

Commercial Square Footage _____ Occupancy Load _____

CONTINUE APPLICATION ON NEXT PAGE ▷ ▷ ▷

BOX BELOW FOR OFFICE USE ONLY

Plan Review _____ Date _____ No. of Inspections _____

Use Group _____ Construction Type _____ Occupancy Load _____

PERMIT APPROVED BY: _____ DATE: _____

Remarks _____

NOTICE

IT IS THE APPLICANT'S RESPONSIBILITY TO OBTAIN THIS PERMIT WITHIN SIX (6) MONTHS OF THE APPLICATION DATE OR THE PRINT(S) AND APPLICATION WILL BE DISCARDED. ARRANGEMENTS MAY BE MADE FOR SPECIAL CIRCUMSTANCES.

PLEASE INITIAL _____

Due to the potential for a utility hazard, the following information **MUST** be provided:

1. Will footings be trenched near poles, guy wires, anchors? YES NO
2. Will any structure be built under or near overhead lines? YES NO
3. Are there any overhead or underground wires on site? YES NO
4. Will any wells be drilled under or near overhead wires? YES NO
5. Will any antenna be erected on the property which would be in conflict with power lines in a standing or free falling situation? YES NO
6. Will any trees be cut which are in proximity of overhead wires? YES NO

If you answered Yes to any of the above questions, you must contact your local utility company.

- THE PROPERTY OWNER OR CONTRACTOR COULD HAVE PERSONAL LIABILITY IN THE EVENT OF INJURY OR FATALITY INVOLVING CONSTRUCTION CLOSE TO EDISON LINES.
- THE PROPERTY OWNER OR CONTRACTOR MUST CONTACT **MISS DIGG 1-800-482-7171** BEFORE EXCAVATING.
- NORMAL LEAD TIME REQUIRED TO RELOCATE EDISON FACILITIES, OR PROVIDE A LINE EXTENSION IS SIX (6) WEEKS AFTER ALL RIGHT-OF-WAY OR OTHER AGREEMENT AND ANY PAYMENTS HAVE BEEN FINALIZED WITH THE PROPERTY OWNER.

The Detroit Edison Company maintains electric distribution facilities in this area. They will provide electric service subject to the rules of the Michigan Public Service Commission in effect at that time.

PROPERTY OWNER INFORMATION (please print)

Property Owner Name _____ Phone () _____

Current Address _____ City _____ State _____ Zip _____

Owner Driver's License # _____ or Date of Birth _____

Property Owner Affidavit: I hereby certify that the work described on this permit application shall be installed in accordance with the State Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for the necessary inspections.

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 the 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.

Property Owner's Signature _____ Date _____

CONTRACTOR / AGENT INFORMATION (please print)

Contractor Name on License _____ Phone () _____

Contractor License Number _____ Expiration Date _____

Current Address _____ City _____ State _____ Zip _____

Federal I.D. Number (or reason for exemption) _____

Workman's Comp. Carrier (or reason for exemption) _____

MESC Number (or reason for exemption) _____

Contractor Affidavit: I hereby certify that the proposed work is 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 and the local jurisdiction. All information 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 the 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.

Contractor's Signature _____ Date _____

Print Name _____ Date of Birth _____

ARCHITECT OR ENGINEER INFORMATION (please print)

Name _____ Phone () _____

Current Address _____ City _____ State _____ Zip _____

Signature _____ Date _____

Plan Review Ledger

Plan Review Number _____

Date	Check No.	To	Type	Amt. of Deposit	Check	Balance

Comments _____

Plan Review Checklist

	Initial	Revision#1	Revision#2
Approved Site Plan			
Building			
Barrier Free Design			
Electrical			
Plumbing			
Mechanical			
Underground(ifapplicable)			
Fire Suppression(ifapplicable)			