

Permit Fee

COMMUNITY BUILDING SERVICES

BUILDING PERMIT APPLICATION (Commercial & Residential) Bldg. Permit No.								
Project Jurisdiction:	☐ DeWitt Charter Township	☐ City of DeWitt ☐ City of Grand Lec						
Diti								
Description of Project:								
Job Address:								
Property Owner:	Name							
		Address	Phone					
Market Value of Project (must include labor, material & profit):								
Work will be complete	d by: □ Owner □ C	Occupant	e below)					
CONTRACTOR INFORMATION:								
Business / Organizatio	n:							
Contractor:	ontractor:Office No.:							
Cell No.:	ell No.:Fax No.:							
Address:		City, State, Zip:						
Email:			Exp. Date:					
Federal ID No. (DO N	OT USE SOCIAL SECUR	TTY NO.):						
Workers Comp Ins. (or	reason for exemption):							
MESC Employer No. (or reason for exemption):							
	A	RCHITECT/ENGINEER:						
Name:		Contact No.:						
Address:		City, State, Zip:						
Email:		State License No.:	Exp. Date:					
	SEWER CONTI	RACTOR INFORMATION (if applic	eable):					
Name:		Phone No.:						
Address:								
	A DDI 17	CANT ACKNOWLEDGEMENT:						
Compiled Laws, prohi	e construction code act of 1972 bits a person from conspiring t	2, Act No. 230 of the Public Acts of 1972, to circumvent the licensing requirements of residential structure. Violators of section 2	f this state relating to persons who are to					
Pı	int	Signature	Date					
BUILDING DEPARTMENT USE ONLY								

Signature

Date

The following MUST be submitted with an application for building permit, as applicable to appropriate jurisdiction:					
	Building Permit Application and Project Specification Sheet.				
	Drawings - 2 sets for residential, 3 sets for commercial - 2 hard copies, 1 digital (must be sealed for commercial projects of any size) <i>or</i> Specification Sheet (i.e. deck, pole barn) filled out as applicable.				
	2 copies of site plan (drawn to scale showing lot dimensions, size & location of proposed & existing structures with distances from property lines, all public & private easements and the location of the water meter for new homes).				
	Inspection Requirements & Miss Dig Notice signed by applicant.				
	Energy Code Worksheet - go to www.energycodes.gov/rescheck to complete an online calculation form.				
	 Sewer Contractor Information. Liability requirements: Permit Bond for \$10,000 Personal liability insurance coverage for \$1 million Property damage insurance coverage for \$1 million Aggregate insurance coverage for \$2 million 				
	Drive permit from the appropriate jurisdiction, unless the road is private.				
	Copies of well & septic permit, if nessecary and/or applicable.				
	Soil erosion permit or exemption/waiver from appropriate jurisdiction.				
	Site address from Zoning/Assessing/Equalization, as applicable, if lot is not in a platted subdivision.				
	Proof of ownership (i.e. Recorded Warranty Deed or Land Contract, Property Transfer Affidavit or written permission from land owner of record authorizing construction on the site.				

DESIGNATED INSPECTION LINE: 517-277-0700



414 E. MAIN STREET DEWITT, MICHIGAN 48820

INSPECTION REQUIREMENTS & MISS DIG NOTICE

CITY OF DEWITT
INSPECTION LINE: (517) 668-0278
DIRECT NUMBER: (517) 669-2441
FAX NUMBER: (517) 669-8211
www.dewittmi.org

Please be advised of the following regulations regarding building permits:

- 1. To receive an inspection within 48 hours, this office requires a 24 hour notice.
- 2. All inspections must be called for by Address or Permit Number.
- 3. The applicant or applicant's agent will be held responsible for calling for the required inspections as indicated on the application form.
- 4. Mandatory Storm Sewer Connection: According to Section 66-311 of the City of DeWitt Code, all houses, buildings or properties located within the City adjoining any street, easement or right of way in which there is located a public storm sewer main shall be required to connect directly to the public sewer main.
- 5. It is a violation of the Michigan Building Code and the City of DeWitt's Zoning Ordinance to occupy any structure without a Certificate of Occupancy.
- 6. Pursuant to Act 53 of 1974, you are responsible to provide notice to all affected parties as to any excavations which could potentially endanger any underground utility facilities. Said notice is required to be given not less than three full business days (72 hours), excluding Saturdays, Sundays and holidays, before beginning any work. Please contact "Miss Dig" at 811 or www.missdig.net.

This certifies that I have read and understand the above:

Signature: _______ Date: _______

City of DeWitt 414 E. Main Street, DeWitt, MI 48820

Roof: Phone: (517) 66	59-2441 Fax: (517) 669-8211 Shingles	
	Felt	
	Rafter Roof Sha	
Shingles -	1,001,316	athin
Felt -	Truss	
Ice Barrier -		
Roof Sheathing - Truss - Yes No If No Answer The Following	Ceiling Joist	
If No Answer The Following		
Rafter Size -	Clear Span, to the opposite support	
Rafter Spacing -	IM1	
Rafter Clear Span -	Headers ————————————————————————————————————	
Rafter Species		
Ridge -		
Ceiling Joist Size	Siding	
Ceiling Joist Spacing-	Charaltina (Charaltina)	
Ceiling Joist Species-	Sheathing ————	
Insulation -	Insulation	
Roof Ventilation -		
1001 7 onthation	Wall Framing —	
Walls:	Interior Finish	
Siding -		
Sheathing -		
Insulation -		
Walls Framing -		-3
Headers -		
Interior Finish -		
Ceiling Height -		
Floor:		
Sub-Floor -		
Floor Joist Size-	Sub-Floor	
Floor Joist Spacing -		
Floor Joist Clear Span -	M:	
Floor Joist Species -	Floor Joist Distance	e
Beam Type & Size -	From C	irade
Distance From Grade	Clear Span, to the opposite support	77
Foundation:	OULD COMPANY	NAME OF THE PARTY.
Anchor Type -	Sill Plate	35
Anchor Spacing -	Foundation Anchor	
Sill Plate - Poured Wall Size -		-
Poured Wall Size -	Foundation Wall	
Block Wall Size		
Vertical Reinforcement - #o.c.	Vertical Reinforcement	
Concrete Floor Thickness -		
Vapor Barrier - Column Pad Size - x x	Concrete Floor	×
Column Pad Sizexx	国籍的	
Column Spacing-	T ISSANITARI TERRAMENTAL	
Footing Width -	Vapor Barrier	
Footing Height -	Footing —)
Footing Depth Below Grade -	LOOKING SERVICE SERVICES	14



* SITE AND/OR PLOT PLAN FORM

CITY OF DEWITT BUILDING PERMIT

INSPECTION LINE: (517) 668-0278

DIRECT NUMBER: (517) 668-2441 FAX NUMBER: (517) 669-8211

Applicant/owner:	Date:		In the circle to the left where north is in rela the site plan drawing	tion to					
Address: Number & Street City Zip Code Lot Number: Subdivision: Unplatted parcel									
Number & Street	City Zip Code			140					
Lot Number: Subdivision: □ Unplatted parcel									
Buildings will be used for:									
									
I certify that the construction proposed will conform to the use dimensions shown and that no changes will be made without first obtaining approval of the DeWitt Township Building Department.									
Applicant/Owner:									
Approved by: Date:									
(Building Department Official)									