



YPSILANTI TOWNSHIP — BUILDING DEPARTMENT —

BUILDING PERMIT APPLICATION

SECTION A: OFFICE USE ONLY

- ☐ PLOT PLAN ☐ CONSTRUCTION DRAWINGS ☐ SIGNED CONTRACT ☐ SKETCH PLAN (SIGNS)
(1 COPIES RESIDENTIAL / 2 COPIES COMMERCIAL / 2 COPIES NEW HOME)

SECTION B: JOBSITE INFORMATION

OWNER NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

☐ RESIDENTIAL ☐ COMMERCIAL ☐ NEW ☐ SERVICE ONLY ☐ ALTERATION ☐ OTHER _____

SECTION C: CONTRACTOR / HOMEOWNER INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ EMAIL: _____

DRIVERS LICENSE # _____ FEDERAL ID # _____

WORKER'S COMP INS CARRIER _____ MESC EMP # _____

CONTRACTOR ID: _____

SECTION D: DESIGN PROFESSIONAL (2015 MICHIGAN BUILDING CODE – SEC 108 (A) 1107.3.4)

Where it is required that documents be prepared by a *registered design professional*, the *building official* shall be authorized to require the *owner* or the owner's authorized agent to engage and designate on the building permit application a *registered design professional* who shall act as the *registered design professional in a responsible charge*. If the circumstances require, the *owner* or the owner's authorized agent shall designate a substitute *registered design professional in responsible charge* who shall perform the duties required of the original *registered design professional in responsible charge*. The *building official* shall be notified in writing by the *owner* or the owner's authorized agent if the *registered design professional in responsible charge* is changed or is unable to continue to perform the duties. **The registered design professional in responsible charge shall be responsible for reviewing and coordinating submittal documents prepared by others, including phased and deferred submittal items, for compatibility with the design of the building.**



Registered Design Professional Signature



Substitute Registered Design Professional Signature

Registered Design Professional Name (Please Print)

Substitute Registered Design Professional (Please Print)

Date

Date

SECTION E: COSTS / FEES / PERMITS

STRUCTURAL IMPROVEMENT VALUE		\$	APPLICATION TYPE (Check appropriate box)	
Value below is NOT included in the above cost			New Building	Demolition
A. Electrical	\$		Addition	Mobile Home Set-Up
B. Plumbing	\$		Deck	Alteration / Repair
C. Heating / AC	\$		Window	Pre-Manufacture
D. Other:	\$		Fence	Sign
TOTAL VALUE:	\$		Roof	Other
FEES (office use only)			PROPOSED USE (CHECK APPROPRIATE BOX BELOW)	
PERMIT	\$		RESIDENTIAL USE	
C of O (Temporary)	\$		One Family	
Plan Review	\$		Two or More Families (# of units)	
YCUA Permit #			Transient Hotel / Motel / Dorm (# of units)	
WCRC Permit #			Garage	Carport
Bike Path	\$		Other	
Number of Sign Faces x \$50	\$		NON – RESIDENTIAL USE	
Contractor Registration Fee	\$		Church / Other	Industrial
Administration Fee	\$		Hospital / Intuitional	Public Utility
Other	\$		Stores / Mercantile	Office / Bank
School / Library / Other Educational	\$		Service Station	Repair Garage

SECTION F: DETAILED DESCRIPTION OF JOB

- Describe in detail the proposed use of existing and / or new building and the work to be performed. Describe in detail materials, structure, weight, method of attachment, color, sign copy, etc.

SECTION G: BUILDING CHARACTERISTICS (Check all appropriate boxes)

PRINCIPAL TYPE OF FRAME	
Masonry (wall bearing)	
Wood Frame	
Structural Steel	
Reinforced Concrete	
Other	
PRINCIPAL TYPE OF HEATING	
Gas	
Oil	
Electricity	
Coal	
Other	

TYPE OF WATER SUPPLY	
Public or Private Company	
Private (septic tank, etc)	
DIMENSIONS	
Number of Stories	
Total sq foot of Floor area (based on exterior dimension)	
NUMBER OF OFF-STREET PARKING SPACES	
Enclosed	
Outdoors	
RESIDENTIAL BUILDINGS ONLY	
Number of Bedrooms	
Number of Bathrooms	

SECTION H: SIGN INFORMATION ONLY (Check all appropriate boxes)

PERMANENT SIGNS	
Ground	
Wall	
Canopy	
Marquee	
Window	
Directional	
ILLUMINATED	
No	
Yes	

TEMPORARY SIGNS	
Construction	
Special Event(s)	
Real Estate	
Sale of Produce	
NUMBER OF SIGN FACES	
One	
Two	

~ Requirement: Enclose fixture specifications, lamping options & photometric grid

***Signs shall be designed by a registered design professional, licensed with the State of Michigan. Signs shall be designed in accordance with Appendix H, Section H105 of the Michigan Building Code, 2021**

Area of sign face: _____ sq ft

Sign Face Dimensions: _____

Overall Sign: _____ ft.

Height to bottom edge of sign box: _____ ft.

Street Right of Way (ROW) Width: _____ ft.

Setback from property line / ROW: _____ ft.

Setback from Structures: _____ ft.

Depth of Footings: _____ ft.

The Office of Community Standards will not discriminate against any individual or group of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

***See next page for signatures**

SECTION I: APPLICANT SIGNATURE

Section 23a of the State Construction Code 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 subject to civil fines.

 _____
SIGNATURE OF LICENSEE OR HOMEOWNER

 _____
PLEASE PRINT NAME LEGIBLY

 _____
WITNESS SIGNATURE AND TITLE

DATE

SECTION J: HOMEOWNER AFFIDAVIT

I hereby certify the work described on this permit application shall be installed by myself, in my own home, which I am living in or am about to occupy. All work shall be installed in accordance with the Michigan Building Code and shall not be enclosed, covered up or put into operation until it has been inspected and approved by the Building Inspector. **I will cooperate with the Building Inspector and assume the responsibility to arrange for necessary inspections and also understand that performing construction activities in contradiction to the application language is a violation of STATE law - Public Act 299; Article 24, section 339.2403.**

 _____
SIGNATURE OF HOMEOWNER

 _____
PLEASE PRINT NAME LEGIBLY

GENERAL: Work shall not be started until issuance of permit. All installations shall be in conformance with the Michigan Code. No work shall be concealed until it has been inspected. When ready for inspection, call the building department at (734) 544.4000 x 1. A minimum of one business day advance notice is required. **The clerk will need the JOB LOCATION AND PERMIT NUMBER.**

Expiration of Permit: A permit remains valid as long as work progresses and inspections are requested and conducted. A permit shall become invalid if the authorized work has not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work.

A PERMIT WILL BE CANCELED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELED PERMITS MAY NOT HAVE A 60% REFUND IF INSPECTIONS / SITE VISITS HAVE BEEN MADE OR SIX MONTHS TIME HAS ELAPSED SINCE PERMIT ISSUANCE. PLAN REVIEW FEES ARE **NOT** REFUNDABLE. RENEWALS OR EXTENSION APPLICATIONS SHALL BE IN WRITING BEFORE THE EXPIRATION DATE HAS OCCURED. A \$50 FEE SHALL BE CHARGED FOR RENEWALS.

****See next page for office use only***

OFFICE USE ONLY: BUILDING CODE A MRC: 2015 – MBC: 2012

SECTION K: PLOT PLAN

Zoning Classification	
Total Lot Size	
Total Land Area (sq ft)	
Total Allowable Coverage	
Total Coverage Shown	
Setbacks	
• Front	
• Back	
• Side	
• Sign Setback from ROW	

Proposed Use:	
Environmental Concerns	
• Wetlands	
• Woodlands Protection	
• Soil Erosion	
• Drainage	



PLANNING & ZONING COORDINATOR APPROVAL _____ DATE _____



BUILDING DIRECTOR / OFFICIAL APPROVAL _____ DATE _____

SECTION L: OFFICE OF COMMUNITY STANDARDS STAFF COMMENTS
