**Building Permit Application** HOUGHTON LAKE BUILDING AGENCY 1250 SOUTH HARRISON RD, PO BOX 8 HOUGHTON LAKE MI 48629 989-422-3687

I. LOCATION OF PROJECT									
ADDRESS:	CITY:			ZIP					
TOWNSHIP:	TOWNSHIP: PARCEL #								
II. IDENTIFICATION									
A: HOMEOWNER INFORMATION (Please include email address)									
NAME:									
ADDRESS:									
CITY:	STATE	:		ZIP:					
PHONE:	EN	/AIL:							
B. ARCHITECT OR ENGINEER									
NAME:									
ADDRESS:	DDRESS:			ZIP:					
C: CONTRACTOR (Please include email address)									
NAME/BUSINESS NAME:	NAME/BUSINESS NAME:				PHONE:				
ADDRESS:	EM	EMAIL:							
CITY:			STATE: ZIP:						
BUILDERS LICENSE#:	EX	EXPIRATION DATE:							
III. TYPE OF IMPROVEMENT AND PLAN REVIEW									
A. TYPE OF IMPROVEMENT									
1. New Building 2. Addition 3. Repair/Alteration 4. Deck/Porch 5. Sign									
6. Demolition 7. Pole Barn 8. Foundation Only 9. Mobile/Preman Home									
B. PLAN REVIEWS TO BE PERFORMED									
Building Plumbing Mechanical Electrical None									
IV. PROPOSED USE OF BUILDING									
1.   One Family   2.   Two or More # units   3.   Attached Garage									
4. Detached Garage 5. Hotel/Motel 6. Other									

<b>***DESCRIPTION OF PROPOSED WORK:</b> Describe in detail the proposed construction including size and use								
of building. If use of existing building is being changed, enter the proposed use.								
V. CHARACTERISTICS OF BUILDING								
A. PRINCIPAL TYPE OF FRAME								
1.   Masonary, Wall Bearing   2.   Wood Frame   3.   Structural   4.   Reinforced   5.   Other     Concrete								
B. PRINCIPAL TYPE OF HEATING FUEL								
1. Gas 2. Oil 3. Electric 4. Propane 5. Other								
C. TYPE OF SEWAGE DISPOSAL								
1. Sewer 2. Septic System								
D. TYPE OF FOUNDATION SYSTEM								
1. Concrete 2. Wolmanized Wood 3. Crawl 4. Basement								
5. Walkout 6. Piers 7. Other								
E. DIMENSIONS								
1. Number of Stories   2. Floor Area: Living Area   1 <sup>st</sup> Floor								
2 <sup>nd</sup> Floor								
3. Mobile/Double Wide: Make: Garage/Storage 1 <sup>st</sup> Floor								
Year: 2 <sup>nd</sup> Floor								
4 Other								
4. Other								

## VI. APPLICANT INFORMATION

APPLICANT IS RESPONSIBL APPLICATION AND MUST P					APPLI	CABLE TO TH	115			
Name				Phone						
Address		C	City			State	Zip			
I hereby certify that the proposed work is authorized by the owner of record and that I have been 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. All information submitted on this application is accurate to the best of my knowledge.										
Section 23a of the State Construction Code Act of 1972, being section 125.1523a of the Michigan compiled law, 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.										
Note: Separate applications must be obtained for plumbing, mechanical and electrical permits. A restroom facility is required on all job sites, either existing or porta potty. (P311.1)										
FEE ENCLOSED \$		CA	SH:	Cł	HECK i	#:				
Signature of Applicant										
X Date:										
VII. HLBA TO COMPLETE THIS SECTION										
PERMITS REQUIRED										
A.Land Use	Yes	No 🗌	E. Sewe	E. Sewer Cap			No 🗌			
B.Soil Erosion	Yes 🗌	] <sub>No</sub> []	F. Septi	F. Septic			No 🗌			
C. Sewer	Yes 🗌	] <sub>No</sub> []	G. Drive	G. Driveway			No 🗌			
D. Well	Yes	] No 🗌	H. Othe	H. Other			No 🗌			
VIII. VALIDATION (For Department Use Only)										
Permit issued for:										
Туре	Use Group Size									
Number of Additional Inspections 1 2										
Approved By:										
Permit # Permit Fee: \$			\$	Date		Date Issued:				