

BUILDING USE

Residential Uses

- Single Family - # of Bedrooms: _____
of Stories: _____
- HUD Residence
- Two or More Family - # of Units: _____
- Other ó Specify: _____
- Transit hotel, motel, or dormitory # of Units _____
- State Approved Modular
- Garage, Accessory Building, Pole Building, Carport

Non-Residential or Commercial Use

- Assembly, Restaurant, etc.
- Business, Office, etc.
- Church, Religious, etc.
- Educational, School, etc.
- Factory, Industrial, etc.
- Other: _____
- Hazardous Materials
- Hotel, Motel, etc.- # Rooms _____
- Institutional, Hospital, Jail, etc.
- Mercantile, Store, Retail, etc.
- Multi-Family - # Dwellings: _____
- Parking or Service Garage
- Storage, Warehouse, etc.
- Tower, Bridge, Barn etc.
- Agricultural: _____
- Public Utility

Describe Use(s):

SELECTED CHARACTERISTICS OF THE BUILDING

Principal Type of Frame

- Wood Frame Masonry Concrete Steel Frame Other: _____

Principal Type of Heating Fuel

- LP Gas Natural Gas Fuel Oil Electricity Wood/Coal Other: _____

Type of Sewage Disposal

- Public Sewer System Private Community System Private Septic System

Types of Water Supply

- Public Water Supply Private Community System Private or Shared Well

Type of Mechanical

- Will there be central air conditioning? Yes No
- Will there be an elevator? Yes No

Building Dimensions and Other Selected Data

- Building Width (ft): _____
- Building Height (ft): _____
- Building Length (ft): _____
- Total Square Feet: _____
- Number of Stories: _____
- Slab on Grade
- Partial Basement
- Crawl Space
- Full Basement

**NUMBER OF OFF-STREET
PARKING SPACES**

- Enclosed
- Outdoors

RESIDENTIAL BUILDINGS ONLY

- Number of Bedrooms _____
- Number of Bathrooms _____

LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION
Environmental Control Approvals

	Required	Not Required	Approved	Date Obtained	Number	By:
1- Zoning						
2- ACT 451, Part 91						
3- Flood Zone						

OFFICE USE ONLY

A: Administration:

Administration Fee	\$55.00
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B: Permit Fee (\$52.00 Min)

Residential .19/sq ft	.19 X _____	=	\$ _____
Mobile Homes	\$57.05	=	\$ _____
Modular	\$104.00	=	\$ _____
Basement .10/ sq ft	.10 X _____	=	\$ _____
Garage .11/ sq ft	.11 X _____	=	\$ _____
Towers/FO	\$104.00	=	\$ _____
Total			\$ _____

C: Permit Value

House	_____ sq ft X \$76.46 = \$ _____ X .0011 = \$ _____ = \$ _____
Basement	_____ sq ft X \$15.30 = \$ _____ X .0011 = \$ _____ = \$ _____
Garage	_____ sq ft X \$29.70 = \$ _____ X .0019 = \$ _____ = \$ _____
Value Total	\$ _____ Total \$ _____

Grand Total (A+B+C) \$ _____

VALIDATION – OFFICE USE ONLY

Building Permit Number: _____	Certificate of Occupancy Issued: _____
Building Permit Issued: _____	Approved By: _____
Building Permit Fee: \$ _____	Title: _____

STATE PERMITS

Electrical, Plumbing, and Mechanical permits are done by the state.

Please visit www.michigan.gov/bccfs.

Chippewa County Building Department

Building Inspector: Jay Predmore

Office Phone: 906-635-6304

Cell Phone: 906-630-0298

Chippewa County

Planning, Zoning, & Construction Resources

319 Court Street ó Sault Ste. Marie, MI 49783
Phone: (906) 635-6362 ó www.chippewacountymi.gov ó Fax: 906-635-6867

REQUIRED SUBMITTALS WITH YOUR BUILDING PERMIT APPLICATION

The following information is provided as guide, listing the required documents to be submitted with your Building Permit Application. All sections of the Building Permit Application applicable to your project must be completed. Incomplete applications will be returned to the applicant for completion and re-submittal.

Page 1:

- É Job Site Location
- É Identification/ Sign and date application
- É Type of Improvement ó Please remember to include the Alteration Estimated Cost figure on the line provided.

Page 2:

- É Building Use
- É Selected Characteristics of Building

Residential Structures:

(One and Two-family dwellings with less than 3,500 square feet of calculated floor area and accessory)

- É Completed Building Permit Application *(Complete all sections of the application applicable to the project)*
- É If the project is an alteration of an existing building ó remember to include the Alteration Estimated Cost figure on the line provided in the box labeled: "Type of Improvement"
- É Copies of all other applicable permits including zoning, drive, septic, well, soil erosion, wetlands, critical dunes, or high risk erosion permits
- É One set of plans that include the following:
 - ó Site plan, foundation plan, floor plans
 - ó Building and wall sections
 - ó Building elevations
- É Dwellings over 3,500 square feet of calculated floor area require sealed plans
- É Accessory buildings over 12 feet in wall height and 3,000 sq ft require sealed plans.

HUD Residences and State Approved Modular Residences:

- É Completed Building Permit Application *(Complete all sections of the application applicable to the project)*
- É If the project is an alteration of an existing building ó remember to include the Alteration Estimated Cost figure on the line provided in the box labeled: "Type of Improvement"
- É Copies of all other applicable permits including zoning, drive, septic, well, soil erosion, wetlands, critical dunes, or high risk erosion permits
- É One set of plans showing the site plan, the foundation, and the method of anchoring the unit to the foundation.
- É For state approved Modular residences, the Building Systems Approval Report together with the approved plans.

Commercial Structures:

(Including one and two-family dwellings with more than 3,500 square feet of calculated floor area)

- É Completed Building Permit Application *(Complete all sections of the application applicable to the project)*
- É If the project is an alteration of an existing building ó remember to include the Alteration Estimated Cost figure on the line provided in the box labeled: "Type of Improvement"
- É Copies of all other applicable permits including zoning, drive, septic, well, soil erosion, wetlands, critical dunes, or high risk erosion permits
- É Two set of plans and specifications with original signature and seal of an architect or professional engineer registered in the State of Michigan.