

MAINTENANCE PERMIT

Date: ____/____/____

Permit # _____
New residential construction, addition, and alteration

AGS Building Department
8721 Gull Road Suite B
Richland, MI 49083
Phone: (269)-629-0600 Fax: (269)-629-0601
Toll Free: (800)-627-2801

Job Address: _____ Property Tax ID: _____

Zoning District: (office use) _____ Permit Determinant: (office use) _____

Use Group: (office use) _____ Owner: _____ Phone () _____

Type Const: _____ Address: _____

Basic Dimensions: _____ ft. x _____ ft. Contractor: _____ Phone () _____

No. Floors: _____ Address: _____

_____ Sq Ft main floor	_____ No. Bedrooms 2 nd floor	_____ No. wood burners
_____ Sq Ft second floor	_____ No. full baths	_____ Sq Ft porches/breezeways
_____ Sq Ft fin. basement	_____ No. half baths	_____ Sq Ft deck
_____ Sq Ft unfinished basement	_____ No. fireplaces	_____ (Ft.) ceiling height
_____ No. Bedrooms 1 st floor	_____ No. chimneys	_____ (Ft.) building height
_____ Sq Ft garage (attached garage requires fire separation)	Please supply 3 sets of plans If print is from an architect, please supply a digital copy	

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

FOUNDATIONS (11)

_____ ftgs _____ X _____
_____ " below fin grade
_____ No. post footings
_____ "X" "X" "
_____ poured walls
_____ H.C. block _____
_____ Wood foundation
_____ (provide diagram)
_____ Ft foundation wall height
_____ "Crawl space wall height
_____ " Egress sill height
_____ No. basement windows
_____ Crawl space vent openings

ROUGH-IN FRAMING (10)

_____ Sill plate (treated)
_____ Wall plates
_____ Headers
_____ Wood girder
_____ Steel girder
_____ Post _____ Ft. O.C.
_____ Stud wall
_____ Masonary
_____ Floor joists _____ " O.C.
_____ Ceiling joists _____ " O.C.
_____ Rafters _____ " O.C.
_____ Truss (diagram required)
_____ " Floor sheathing
_____ " Wall sheathing
_____ " Roof sheathing
_____ " Corner brace sheath

EXTERIOR (3)

_____ Wood
_____ Aluminium/Vinyl
_____ Brick
_____ Block

ROOFS (4)

_____ Hip
_____ Gable
_____ Front overhang
_____ Other overhang
_____ Eavestrough
_____ Asphalt shingles
_____ Underlayment
_____ Other coverings
_____ Attic access 22" x 30"

CHIMNEY TYPE

_____ Brick
_____ Block
_____ Stone
_____ Metal
_____ Vents

WINDOWS (5)

_____ No. of windows
_____ Wood sash
_____ Metal sash
_____ Type
_____ Egress/bedrooms

INSULATION (9)

_____ " Fiberglass
_____ " Cellulose
_____ "Blown in fiberglass
_____ " Foam
_____ other
_____ "rigid poly ure.
_____ "rigid styro
_____ "insul sheath
_____ wind barrier
_____ (mil) moisture barrier

Interior (13)

_____ Foyer
_____ Kitchen floor
_____ Other floor
_____ Drywall
_____ Plaster
_____ Covered ceiling
_____ Panel wainscot
_____ 5/8" garage fire code

BUILT-IN ITEMS (15)

_____ Oven _____ Range
_____ Disposal
_____ Hoods/fan
_____ Dishwasher
_____ Refrigerator
_____ Incinerator
_____ Vanities
_____ Ft. Cupboard length

Contractor will stake 2 adjacent lot lines for First Inspection.
Sketch lot diagram on second page. Also sign permit.

COST OF PERMIT \$ _____

PERMITS EVENTUALLY NEEDED FOR THIS PROJECT (trade permits are separate from the building permit)

Electrical Permit

Mechanical Permit

Plumbing Permit

☐ yes ☐ no

☐ yes ☐ no

☐ yes ☐ no

By: _____
Building Official

Make checks payable to:

COMPLETE INFORMATION ON SECOND PAGE

MAINTENANCE PERMIT SECOND PAGE

LOT DIAGRAM

Owner: _____ Job Address: _____

Address: _____

Tax I.D.: _____

- | | | |
|------------------------------|-----------------------------------------------------------|--------------------------------------------------------|
| (1) Draw lot lines in feet | (4) Draw proposed construction | (7) Draw lakes, streams, and wet lands within 500 feet |
| (2) Label street | (5) Show dimensions of all buildings | (8) Contractor/owner will stake 2 adjacent lot lines |
| (3) Draw existing structures | (6) Show distance from all sides of building to sidelines | |

Engineer/Architect: _____	Phone (_____) _____
Address: _____	

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information

Name		Phone Number ()
E-mail address		Cell Phone Number ()
Address:		City, State, Zip Code
Federal ID/Social Security No.		MESC Employer No.
License No.	Exp Date	Worker's Compensation Carrier
If exempt from any of the above, explain here:		

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.

Homeowner's Affidavit and Signature

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, 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 necessary and timely inspections.

Signed: _____ Date: _____

Agent/Contractor's Affidavit and Signature

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: _____ Date: _____

MAINTENANCE PERMIT CHECKLIST – (Return with Application)

Project address/location of proposed work: _____

Owner's Name: _____

Contractor's Name: _____

Before a permit may be issued, all of the following documentation must be submitted or justified as non-applicable. Please indicate by checkmark that each item has been enclosed with the application.

- _____ 1. **LOT DIAGRAM** on back of first page of application.
Is the structure within the property boundaries? _____ YES _____ NO
- _____ 2. **PROOF OF OWNERSHIP** (Provide a copy of one of the following documents: tax statement, assessment notice, deed, title insurance commitment...) **RECORDED DEED OR RECORDED LAND CONTRACT WILL BE REQUIRED FOR ALL NEW HOME CONSTRUCTION WHETHER STICK BUILT OR PRE-MANUFACTURED. THE RECORDING DATE OF THIS DEED MUST BE PRIOR TO 4/1/97.**
- _____ 3. **PROPERTY TAX I.D. NUMBER**
- _____ 4. **DESCRIPTION OF MAINTENANCE WORK PROPOSED:**

- _____ 5. **OTHER PERMITS EVENTUALLY NECESSARY:**
_____ Electrical _____ Mechanical _____ Plumbing
The applicant or a licensed contractor must submit separate application forms for these permits prior to commencing work on that portion of the project.

RESPONSIBILITIES OF APPLICANTS

It is the legal responsibility of the applicant to call for all required inspections or before any electrical, plumbing, mechanical, or structural work is concealed or covered. It is also the applicant's responsibility to obtain and submit separate applications for any electrical, mechanical, plumbing or building permits.

BUILDING DEPARTMENT (Associated Government Services, Inc.) OFFICE HOURS are 8:00 am to 12:00 and 1:30pm to 4:30pm, Monday through Friday. The HOME OFFICE may be contacted by PHONE at 269-629-0600 or 1-800-627-2801 (an answering system operates 24 hours a day to obtain information, forms, and inspections); by MAIL at 8721 Gull Road, Suite B, Richland, MI, 49083; or by FAX at 269-629-0601.

Signed: _____ Date: _____

**PLEASE CALL SHOULD YOU REQUIRE FURTHER
ASSISTANCE IN COMPLETING APPLICATIONS.**