



**CHIPPEWA COUNTY BUILDING DEPARTMENT
CONSTRUCTION CODE ENFORCING AGENT**

319 COURT STREET – SAULT STE. MARIE, MI 49783
Phone: (906) 635-6362 – www.chippewacountymi.gov – Fax: (906) 635-6867

BUILDING PERMIT APPLICATION

APPLICATION MUST BE COMPLETE – SEE INSTRUCTIONS ON FINAL PAGE OF APPLICATION

I. JOB SITE LOCATION				
ADDRESS			PROPERTY ID#	
CITY			17-	
ZIP		TOWNSHIP		
			- - - - -	

II. IDENTIFICATION				
A. OWNER				
NAME			HOME PHONE	CELL PHONE
ADDRESS		CITY	ZIP	EMAIL ADDRESS
B. CONTRACTOR (LEAVE BLANK IF NONE)				
NAME			BUSINESS PHONE	CELL PHONE
ADDRESS		CITY	ZIP	EMAIL ADDRESS
BUILDERS LICENSE NUMBER			EXPIRATION DATE	
C. ARCHITECT (LEAVE BLANK IF NONE)				
NAME			BUSINESS PHONE	CELL PHONE
ADDRESS		CITY	ZIP	EMAIL ADDRESS

III. TYPE OF IMPROVEMENT				
<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> CHANGE IN USE	<input type="checkbox"/> REPAIR	<input type="checkbox"/> REPLACE	<input type="checkbox"/> TOWER
<input type="checkbox"/> ADDITION	<input type="checkbox"/> RE-ROOF	<input type="checkbox"/> FOUNDATION ONLY	<input type="checkbox"/> MOBILE HOME	
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> SPECIAL INSPECTION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> DECK/COVERED PORCH	
ESTIMATED COST OF CONSTRUCTION \$				

IV. SIGNATURE OF APPLICANT	
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES & CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION. 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/HER AUTHORIZED AGENT AND I 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, 1972 PA230, 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 APPLICANT	DATE

Permit Number: _____ Name: _____

V. BUILDING USE

A. RESIDENTIAL

- SINGLE FAMILY - # OF UNITS __ HUD RESIDENCE GARAGE, POLE BUILDING, CARPORT, ACCESSORY BLDG.
 TWO OR MORE FAMILY STATE APPROVED MODULAR TRANSIENT HOTEL, MOTEL - # OF UNITS ____
 OTHER _____ ADDITION _____

B. NON-RESIDENTIAL OR COMMERCIAL USE

- ASSEMBLY, RESTAURANT, ETC. HAZARDOUS MATERIALS PARKING/SERVICE GARAGE
 BUSINESS, OFFICE, ETC. HOTEL, MOTEL, ETC.- # ROOMS _____ STORAGE, WAREHOUSE, ETC.
 CHURCH, RELIGIOUS, ETC. INSTITUTIONAL, HOSPITAL, JAIL, ETC. TOWER, BRIDGE, BARN ETC.
 EDUCATIONAL, SCHOOL, ETC. MERCANTILE, STORE, RETAIL, ETC. AGRICULTURAL: _____
 FACTORY, INDUSTRIAL, ETC. MULTI-FAMILY - # DWELLINGS: _____ PUBLIC UTILITY
 OTHER: _____

NON-RESIDENTIAL/COMMERICAL USE - USE THE FOLLOWING SPACE PROVIDED TO DESCRIBE IN DETAIL PROPOSED USE OF BUILDING

VI. SELECTED CHARACTERISTICS OF THE BUILDING

A. PRINCIPAL TYPE OF FRAME

- WOOD FRAME MASONRY CONCRETE STEEL FRAME OTHER: _____

B. PRINCIPAL TYPE OF HEATING FUEL

- LP GAS NATURAL GAS FUEL OIL ELECTRICITY WOOD/COAL OTHER: _____

C. TYPE OF SEWAGE DISPOSAL

- PUBLIC SEWER SYSTEM PRIVATE COMMUNITY SYSTEM PRIVATE SEPTIC SYSTEM

D. TYPES OF WATER SUPPLY

- PUBLIC WATER SUPPLY PRIVATE COMMUNITY SYSTEM PRIVATE OR SHARED WELL

E. BUILDING DIMENSIONS AND OTHER SELECTED DATA

- | | | |
|--|--|--|
| BUILDING WIDTH (FT): _____
BUILDING HEIGHT (FT): _____
BUILDING LENGTH (FT): _____
TOTAL SQUARE FEET: _____
NUMBER OF FLOORS: _____
NUMBER OF BEDROOMS: _____
OF FULL BATHROOMS: _____
OF HALF BATHROOMS: _____ | <input type="checkbox"/> SLAB ON GRADE
<input type="checkbox"/> CRAWL SPACE
<input type="checkbox"/> PARTIAL BASEMENT
<input type="checkbox"/> FULL BASEMENT
<input type="checkbox"/> FINISHED BASEMENT
<input type="checkbox"/> UNFINISHED BASEMENT
<input type="checkbox"/> FIREPLACE/CHIMNEY
<input type="checkbox"/> AIR CONDITIONING | FLOOR AREA:
BASEMENT: _____
1 ST /2 ND FLOOR: _____
GARAGE: _____
LOFT: _____
DECK/PORCH: _____ |
|--|--|--|

VII. ENVIRONMENTAL CONTROL APPROVALS (LOCAL GOVERNMENT AGENCY TO COMPLETE SEC.)

	REQUIRED	NOT REQUIRED	APPROVED	DATE OBTAINED	NUMBER	BY:
1- ZONING						
2- ACT 451, PART 91						
3- FLOOD ZONE						
4- HEALTH DEPT.						

VALIDATION – OFFICE USE ONLY

BUILDING PERMIT ISSUED: _____ CERTIFICATE OF OCCUPANCY ISSUED: _____

BUILDING PERMIT FEE: \$ _____ APPROVAL:

*PLEASE CONTACT BUILDING DEPT. FOR PERMIT FEES – FOLLOWING BUREAU OF CONSTRUCTION CODES SQ. FT. CONSTRUCTION COST TABLE. FEES SUBJECT TO UPDATED RATES. MINIMUM FEES APPLY

NOTICE: ELECTRICAL, PLUMBING AND MECHANICAL PERMITS ARE DONE BY THE STATE OF MICHIGAN.

CHIPPEWA COUNTY BUILDING DEPARTMENT

BUILDING OFFICIAL: FRANK SIMS

OFFICE PHONE: (906) 635-6362

CELL PHONE: (906) 630-0298

EMAIL: BUILDING@CHIPPEWACOUNTYMI.GOV

CHIPPEWA COUNTY

PLANNING, ZONING & CONSTRUCTION RESOURCES

319 COURT STREET – SAULT STE. MARIE, MI 49783

PHONE: (906) 635-6362 – WWW.CHIPPEWACOUNTYMI.GOV – FAX: (906) 635-6867

SEE NEXT PAGE FOR APPLICATION INSTRUCTIONS.

INSTRUCTIONS AND REQUIRED SUBMITTALS WITH YOUR BUILDING PERMIT APPLICATION

ALL SECTIONS OF THE BUILDING PERMIT APPLICATION APPLICABLE TO YOUR PROJECT MUST BE COMPLETED. FILL OUT APPLICATION FOR ONLY THE CONSTRUCTION BEING COMPLETED WITH THIS PERMIT. INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT FOR COMPLETION AND RE-SUBMITTAL.

SECTION I. JOB SITE APPLICATION

- All information must be provided, full job site address, township, and property id#.

SECTION II. IDENTIFICATION

- Property owners name, address, phone number and email address.
 - Contractors name, address, phone number and email address. Current builders license number is required. Leave section blank if a contractor is not being used.
 - Architects name, address, phone number and email address. Leave section blank if an architect is not being used.
- EMAIL WILL BE THE PRIMARY DELIVERY METHOD OF ALL PERMITS AND CERTIFICATES. IF EMAILED, A HARD COPY WILL NOT BE ISSUED TO THE APPLICANT UNLESS REQUESTED.**

SECTION III. TYPE OF IMPROVEMENT

- Mark the type of improvement – Remember too include the projects estimated cost figure on the line provided.

SECTION IV. SIGNATURE OF APPLICANT

- All applications must be signed and dated by the applicant.

SECTION V. BUILDING USE

- Residential – Mark the use of the residential building
 - (One and two- family dwellings with less than 3,500 sq. ft. of calculated floor area and accessory)
 - Submittals – copies of all other applicable permits including: zoning, flood plain zone elevation (if required), drive, septic, well, soil erosion, wetlands, critical dunes, or high-risk erosion permits.
 - One set of plans that include: site plan, foundation plan, floor plans, building and well sections, building elevations.
 - Dwellings over 3,500 sq. ft of calculated floor area require sealed plans
 - Accessory buildings over 12 feet in wall height or buildings width over 36' & building length of 60' require sealed plans.

HUD Residences and State Approved Modular Residences:

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

B. Commercial Structures

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

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

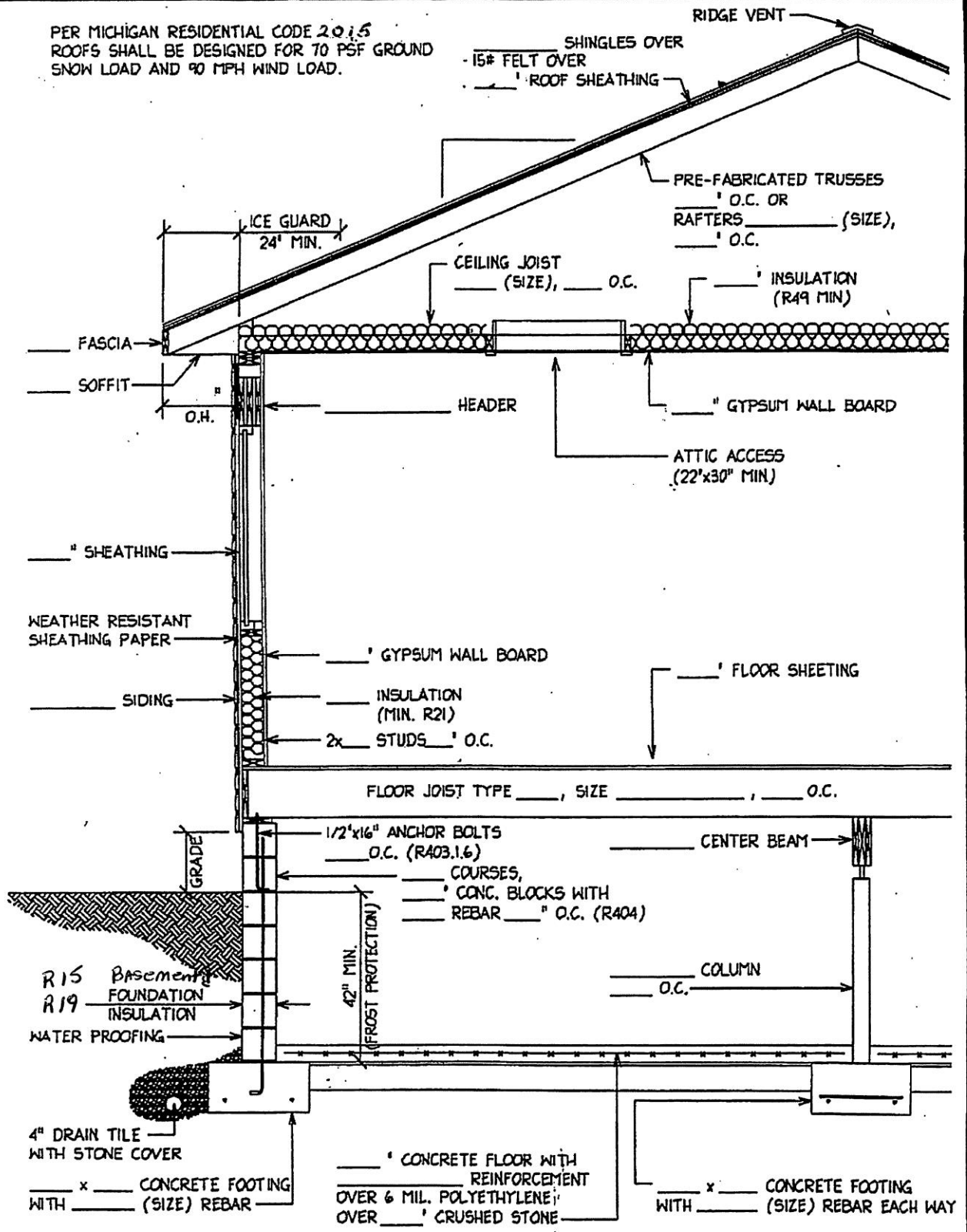
SECTION VI. SELECTED CHARACTERISTICS OF THE BUILDING

- Complete entire section. Mark all appropriate boxes and fill out all sections. If application is for an addition or alteration, answer the questions for ONLY the work being done, do not include existing structure information.

SECTION VII. ENVIRONMENTAL CONTROL APPROVALS

- Contact and get required approval or permit for all sections of local government. Submit copies of all permits with application.

PER MICHIGAN RESIDENTIAL CODE 2015
 ROOFS SHALL BE DESIGNED FOR 70 PSF GROUND
 SNOW LOAD AND 90 MPH WIND LOAD.

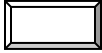






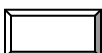




PROJECT:
 CROSS-SECTION

DATE:
 SHEET OF
 JOB NO:

**CHECK LIST TO OBTAIN A
CHIPPEWA COUNTY BUILDING PERMIT**



- | | | | |
|---|---|---|--|
|  | 1. ADDRESSES | Equalization Department
319 Court Street
Sault Ste. Marie, MI 49783 | (906) 635-6304

(906) 635-6372 Fax |
| <hr/> | | | |
| 2. TOWNSHIPS WITH ZONING | | | |
| | • Bay Mills | Joe VanDosen | (906) 437-5437 or (906) 440-1642 |
| | • Bruce | Michael Pins | (906) 635-3058 |
| | • Dafer | Robert Brown | (906) 630-5363 |
| | • Kinross | Township Office | (906) 495-5381 |
| | • Pickford | Ken Waybrant | (906) 647-3361 |
| | • Raber | Paul Warner | (906) 297-3805 or (906) 322-2873 |
| | • Rudyard | Township Office | (906) 478-5041 |
| | • Soo | Jim Callon | (906) 203-7346 |
| | • Sugar Island | Burt Menard | (906) 635-5105 |
| | • Superior | Rick Orsborne | (906) 248-5213 Ex 107 (906) 203-7157 |
| | • Whitefish | Edson Forrester | (906) 492-3452 Ex 6 |
| <hr/> | | | |
|  | 3. WELL & SEPTIC | Chippewa County Health Department
508 Ashmun Street
Sault Ste. Marie, MI 49783 | (906) 635-3620 |
| <hr/> | | | |
|  | 4. WETLANDS | DEQ | Sean Soucy (906) 250-0588 |
|  | 5. HIGH RISK EROSION AREA | SoucyS@michigan.gov | |
| <hr/> | | | |
|  | 6. Erosion Control Permit Required When Disturbing More Than an Acre of Property Or Within 500 Feet of Lake, River or Natural Waterway | Soil & Sedimentation Control
2847 Ashmun Street
Sault Ste. Marie, MI 49783 | |
| | | Contact Mike McCarthy
Information available on line at www.clmcd.org/soilerosion1.asp | (906) 635-1278 |
| <hr/> | | | |
|  | 7. Docks & Dredging (if necessary) | Corp of Engineers
Ed Arthur (906) 635-3461 | Sue Bright (906) 635-3462
(906) 632-3311
(906) 635-3463 |
| <hr/> | | | |
|  | 8. Culverts | Chippewa County Road Commission
3949 S. Mackinac Trail
Sault Ste. Marie, MI 49783 | (906) 635-5295 |
| <hr/> | | | |
|  | 9. Construction Permit For All of Chippewa County | Building Inspector
319 Court Street
Sault Ste. Marie, MI 49783 | building@chippewacountymi.gov
Office (906) 635-6362
Frank Sims Cell (906) 630-0298 |
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|  | 10. Flood Plain | Linda D. Hansen, PE, PWS.
DEQ Water Resources Division
427 US Highway 41N
Baraga, MI 49908
hansen6@michigan.gov | (906) 483-3896 |
| <hr/> | | | |
|  | 11. STATE OF MICHIGAN PERMITS | State Inspectors | |
| | Electrical Inspection | Ben Bourque | (906) 241-3424 |
| | Electrical for Detour | Steve Harrison | (906) 647-9595 |
| | Plumbing Inspection | Craig Cole | (906) 235-8417 |
| | Mechanical Inspection | Keith Olson | (906) 241-0730 |
| | STATE PERMITS ONLINE AT www.michigan.gov/bcc | | |