



2010 South Lincoln Road
Mt. Pleasant, MI 48858

Phone (989) 772 4600
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Building Department
Isabella County, Michigan

INSTRUCTIONS FOR BUILDING PERMITS

PLEASE NOTE: Every building situation is different and some questions on the permit application may not apply to your specific situation. Please read the entire application carefully!

BUILDING PERMIT APPLICATIONS **WILL NOT** BE ACCEPTED UNLESS THE FOLLOWING ARE PROVIDED AT THE TIME OF APPLICATION.

1. **CORRECT PROPERTY TAX ID#.**
2. **CORRECT ADDRESS OF PROPERTY.**
3. **ZONING APPROVAL** (if applicable).
4. **SEPTIC APPROVAL** (if applicable). Contact Central Michigan District Health Department (989) 773-5921. Septic is needed if:
 - a. New dwelling
 - b. When the dwelling is being replaced by a different dwelling (mobile home, modular home, etc)
 - c. When a bedroom addition is being constructed.
5. **APPLICATIONS FOR NEW HOMES MUST INCLUDE:**
 - a. Two (3) sets of plans that include:
 1. Foundation and floor plans
 2. Roof and wall sections
 3. Building elevations
 - b. Michigan Uniform Energy Code Compliance form
 - c. Site Plan
 - d. Utility permits obtained from Isabella County
6. **APPLICATION FOR COMMERCIAL PROJECTS MUST INCLUDE:**
 - a. Four (4) sets of plans; sealed by an approved design professional
 - b. Site Plan
 - c. Planning Commission approval
 - d. Township plan review plus any additional agency plan reviews required
 - e. Michigan Uniform Energy Code Compliance form
7. **APPLICATION FOR MOBILE HOMES OR PREMANUFACTURED HOMES MUST INCLUDE:**
 - a. Two (2) sets of plans for the foundation and the method of anchorage to the foundation or pier.
 - b. Site Plan
 - c. For Michigan approved pre-manufactured units one (1) copy of the building system approval and the approved plans.
8. **SIGNATURE ON APPLICATION**
 - a. If a contractor is doing the work then the contractor's signature is required
 - b. If a homeowner is doing the work then the homeowner's signature is required along with a copy of a valid driver's license.

BUILDING PERMIT FEES:

Building permit fees are calculated by the Building Official based on the following:

- Total square footage of the structures
- Use group
- Type of construction

All applicable fees shall be paid in full before a building permit will be issued.

WHEN TO CALL FOR AN INSPECTION

Please call the building official at least two (2) days prior to the time you will need an inspection. **IT IS A PERMIT HOLDER'S RESPONSIBILITY** to call for inspections, prior to the construction being covered.

FOUNDATION INSPECTION

Footing Inspection – Prior to placing concrete in piers, trenches and formwork

Backfill Inspection – Prior to backfill and after the footings, wall, waterproofing, and drain tile is installed.

ROUGH INSPECTION

The rough inspection is to be made upon completion of the framing of the building or structure and must have Electrical, Mechanical, Plumbing, and Energy Code Compliance prior to the building rough in.

INSULATION INSPECTION

The insulation inspection is to be made prior to covering walls. Caulk and seal per code.

FINAL INSPECTION

The final inspection is to be made upon completion of the building or structure and must have Electrical, Mechanical, Plumbing, and Energy Code Compliance prior to the building inspection along with blower door test as required for residential.

CERTIFICATE OF OCCUPANCY

A new building or a building that is altered shall not be used or occupied until a **Certificate of Occupancy** is issued by the Building Official. The permit holder or their authorized agent must request a **Certificate of Occupancy** upon the completion of the project. This request may be verbal, however, it is recommended that a written request be sent in, which includes the building, electrical, mechanical, plumbing, boiler and/or elevator permit numbers. A **Certificate of Occupancy** cannot be issued until all fees are paid, permits are finalized and the work covered by a building permit has been completed in accordance with the permit, code, and other applicable laws and ordinances.



Charter Township of Union
 2010 S. Lincoln
 Mt. Pleasant MI 48858
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BUILDING PERMIT APPLICATION

IDENTIFICATION			
OWNER OR LESSEE			
NAME:		PROPERTY ADDRESS:	
PROPERTY TAX ID#			
Owner's Signature:		Date:	
ARCHITECT OR ENGINEER			
NAME:		ADDRESS:	
CITY:	STATE:	ZIP:	TELEPHONE:
EMAIL ADDRESS:			
LICENSE NUMBER:		EXPIRATION DATE:	
CONTRACTOR			
BUSINESS NAME:		ADDRESS:	
CITY:	STATE:	ZIP:	TELEPHONE:
CONTACT NAME:		CONTACT TELEPHONE:	
EMAIL ADDRESS:			
LICENSE NUMBER:		EXPIRATION DATE:	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION			
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION		EXPIRATION DATE:	
TYPE OF IMPROVEMENT AND PLAN REVIEW			
TYPE OF IMPROVEMENT			
<input type="checkbox"/> New Building <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Foundation <input type="checkbox"/> Grading <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Mobile Home Set Up <input type="checkbox"/> Pre-manufactured <input type="checkbox"/> Other			
<p>Plans must be submitted with an Application for a Plan Review and the appropriate fee before permits can be issued. EXCEPTION: Plans are not required for alterations and repair work determined by the building official to be of a minor nature. Plans and specifications are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.</p> <p>Plan Review Submitted: _____ Plan Review Completed: _____</p>			

PROPOSED USE OF BUILDING

RESIDENTIAL

- One Family Hotel, Motel Detached Garage
- No. of Units _____
- Two or more Family Attached Garage Other
- No. of Units _____

DESCRIPTION: Describe in full detail proposed use of building including exact sizes of all construction to be completed:

NON RESIDENTIAL

- Amusement Service Station School, Library, Educational
- Church, Religion Hospital, Intuitional Store, Mercantile
- Industrial Office, Ban, Professional Tanks, Towers
- Parking Garage Public Utility Other

DESCRIPTION: Describe in full detail proposed use of building including exact sizes of all construction to be completed:

SELECTED CHARACTERISTICS OF BUILDING

PRINCIPAL TYPE OF FRAME

- Masonry, Wall Bearing Wood Frame Structural Steel Reinforced Concrete Other

Principal Type of Heating Fuel

- Gas Oil Electricity Coal Other

Type of Sewage Disposal

- Public or Private Company Septic System

Type of Water Supply

- Public or Private Company Private Well or Cistern

Will there be an irrigation system? Yes No

Type of Mechanical

Will there be air conditioning? Yes No

Dimensions/ Data

Number of Stories _____	Floor Area: Existing	Alterations	New
Use Group _____	Basement _____	_____	_____
Construction Type _____	1 st & and Flr _____	_____	_____
Construction Type _____	3 rd and Above _____	_____	_____
No. of Occupants _____			

Number of Off Street Parking Spaces

Enclosed _____ Outdoors _____ Handicap _____

APPLICATION INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:

NAME:		ADDRESS:	
CITY:	STATE:	ZIP:	TELEPHONE:

I HEARBY 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 WE AGREE TO CONFORM TO ALL APPLICABLE LAWS TO 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 PA 230, MCL 125.1523A prohibits a person from conspiring to circumvent the licensing requirements of this state related to person 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
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I. LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION

DESCRIPTION	REQUIRED	APPROVED	DATE	BY
Fire District	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Pollution Control	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Energy Code	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Soil Erosion	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Flood Zone	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No			

II. VALIDATION – FOR DEPARTMENT USE ONLY

Use Group _____	Type of Construction _____
Square Feet _____	Total Value _____
Building Fee Due _____	

APPROVAL SIGNATURE	DATE
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