

AGS Building Dept
 8721 Gull Rd. Suite B
 Richland, MI 49083
 (269) 629-0600
 (800) 627-2801
 Fax (269) 629-0601

Maintenance PERMIT Commercial

Date: _____/_____/_____

Jurisdiction of: _____

Permit # _____

Job Location: _____

Property Tax I.D. #: _____

Zoning District: _____

Permit Determinant: _____

Use Group: _____

Type of Improvement: _____

Type Construction: _____

Owner: _____ () _____ phone

No. of Floors: _____ Bldg. Height: _____

Address: _____

NONRESIDENTIAL - Describe in detail proposed use of building, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

Explanation of work:

REQUIRED DOCUMENTS

ADDITIONAL PERMITS REQUIRED

- ____ Site Plan Approval
- ____ Site Plan
- ____ Variance Approval if Applicable
- ____ 2 Sets of Sealed Drawings & Specs.
- ____ P.A. 135 Disclosure
- ____ Plan Review and Permit Fee

- ____ Curb or Sidewalk Cut
- ____ Electrical
- ____ Mechanical
- ____ Plumbing
- ____ Sign or Billboard
- ____ Demolition

- ____ Erosion Control
- ____ Storm Sewer Connection
- ____ Sanitary Sewer Tap
- PLAN PREVIEW** \$ _____
- COST OF PERMIT** \$ _____
- TOTAL COST** \$ _____
- Building Dept. By** _____

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 ()	
Address		City	State Zip
Federal ID No./Social Security no.		MESC Employer No:	
License No.	Expiration Date	Worker's Disability 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 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.

AGENT'S AFFIDAVIT

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.

Signed: _____ Date: _____

LOT DIAGRAM

Owner: _____

Project Address: _____

Property Tax #: _____

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

Signature of Applicant/Agent: _____ 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.

Blue prints and drawings must contain sufficient detail to perform a plan review for conformance with the State Building Code. Include wall section/cross-section drawing showing material dimensions and specification from footing to rafters, as well as floor plan indicating all room dimensions, window, door, and stair openings. All structures containing pre-manufactured members (roof trusses, floor trusses, laminated beams, etc.) require sealed diagram from the manufacturer; forward to our office at time of delivery.

(1) ZONING APPROVALS, IF OTHER THAN ASSOCIATED GOVERNMENT SERVICES:
Fawn River Township – Gary Bland, (269) 651-3363

COUNTY	SANITATION PERMIT (7) (Septic & Well)	DRIVEWAY PERMIT (8)	SOIL EROSION PERMIT (9)
CALHOUN	Environmental Health 190 E. Michigan Suite A 100 Battle Creek, MI 49014 Phone: (269) 966-1241	Road Commission 13300 – 15 Mile Road Marshall, MI 49068 Phone: (269) 781-9841	Road Commission 13300 – 15 Mile Road Marshall, MI 49068 Phone: (269) 781-9841
KALAMAZOO	Human Services Department Environmental Health 3299 Gull Road Kalamazoo, MI 49048 Phone: (269) 373-5210	Road Commission 3801 E. Kilgore Road Kalamazoo, MI 49001 Phone: (269) 381-3171	Drain Commission Room 107 201 W. Kalamazoo Ave. Phone: (269) 384-8117
ST. JOSEPH	Community Health Agency Environmental Health 1110 Hill Street Three Rivers, MI 49093 Phone: (269) 273-2161	Road Commission 20914 M-86 Centreville, MI 49032 Phone (269) 467-6393	Conservation District 693 East Main Street Centreville, MI 49032 Phone: (269) 467-6336
VAN BUREN	District Health Department 57418 CR681, Suite A Hartford, MI 49057 Phone: (269) 621-3143	Road Commission 325 W. James Street P.O. Box 156 Lawrence, MI 49064 Phone: (269) 674-8011	Soil Erosion and Sedimentation Control 219 East Paw Paw Street Paw Paw, MI 49079 Phone: (269) 657-8200
(8)	Michigan Department of Transportation (MDOT) (269) 337-3926 (Driveways on Michigan or U.S. Highways)		
(9)	Michigan Department of Environmental Quality (MDEQ) Plainwell Office: (269) 685-6851 Lansing Office: (517) 373-1170		

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COMPLETING APPLICATIONS.**