

# RESIDENTIAL BUILDING PERMIT

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

VILLAGE OF BANCROFT

Permit # \_\_\_\_\_

New residential construction, addition, and alteration

VILLAGE OF BANCROFT

PO BOX 97 / 120 WARREN STREET

BANCROFT MI 48414

PH. 989-634-5375 FAX.989-634-5911

BLDG DEPT. 800-627-2801 EXT. 0

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: \_\_\_\_\_ Cell \_\_\_\_\_

\_\_\_\_\_ Sq Ft main floor

\_\_\_\_\_ Sq Ft second floor

\_\_\_\_\_ Sq Ft finished basement

\_\_\_\_\_ Sq Ft unfinished basement

\_\_\_\_\_ No. rooms 1<sup>st</sup> floor

\_\_\_\_\_ Sq Ft garage (attached garage requires fire separation)

\_\_\_\_\_ No. bedrooms

\_\_\_\_\_ No. full baths

\_\_\_\_\_ No. half baths

\_\_\_\_\_ No. fireplaces

\_\_\_\_\_ No. chimneys

\_\_\_\_\_ No. wood burners

\_\_\_\_\_ Sq Ft porches

\_\_\_\_\_ Sq Ft breezeways

\_\_\_\_\_ Sq Ft deck

\_\_\_\_\_ (Ft.) ceiling height

\_\_\_\_\_ (Ft.) building height

Please supply 3 sets of plans

## 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
- \_\_\_\_\_ Metal
- \_\_\_\_\_ Asphalt shingles
- \_\_\_\_\_ Underlayment
- \_\_\_\_\_ Vents
- \_\_\_\_\_ Other Coverings
- \_\_\_\_\_ Attic access 22" x 30"

### CHIMNEY TYPE

- \_\_\_\_\_ Brick
- \_\_\_\_\_ Block
- \_\_\_\_\_ Stone
- \_\_\_\_\_ Zero Clearance

### 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:  
VILLAGE OF BANCROFT

COMPLETE INFORMATION ON SECOND PAGE

# BUILDING 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: \_\_\_\_\_