

CITY OF WAKEFIELD, MICHIGAN

CITY MANAGER
(906) 229-5131

509 SUNDAY LAKE ST.

49968

Member

MICHIGAN MUNICIPAL LEAGUE

Fax (906) 229-5331

CITY CLERK
(906) 229-5131

BUILDING PERMIT/INSPECTION APPLICATION

Date: _____

Project Information

Property Address: _____ Tax ID: 2753-_____

Owner Name: _____ Phone: _____ Cell: _____

Mailing Address (If different): _____

Applicant/Contractor Information

Contractor Business Name: _____

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Builders License Number: _____ Expiration Date: _____

Request Building Permit to:

Construct Repair Replace Addition Demo

Type of Work to be Performed:

New Home Windows (Dif. Size) Deck
 Fence Garage Doors
 Roofing (Metal or Asphalt) Shed Other: _____

Size of Building/Garage/Deck: _____ Square Ft.: L _____ W _____ H _____

Additional Information on work being performed:

BUILDING PERMIT FEES

Adopted March 30, 2015

Deck - \$40.00

New Homes – first \$20,000 = \$50.00

\$2 per \$1,000 over \$20,000

(Example \$100,000 home = \$210 permit)

Single & Double Mobile Homes - \$150.00

Double Occupancy Homes - \$300.00

Garages – up to 24' x 24' - \$75.00

Larger than 24' x 24' - \$125.00

Commercial Buildings – ½ cost of Bureau of Construction Fee.

Additions – up to 12' x 12' - \$50.00

Larger than 12' x 12' - \$100.00

Repairs – Up to \$1,000 - \$30.00

Over \$1,000 - \$40.00

New Roofs (Asphalt/Steel) - \$40.00

Sheds - \$15.00

Fence - \$25.00

No Permit Fee - \$75.00

Demo Permit - \$5.00

BUILDING PERMIT APPLICATION

CITY OF WAKEFIELD
509 SUNDAY LAKE STREET
WAKEFIELD, MI 49968
www.cityofwakefield.org

1. CONSTRUCTION LOCATION: (must be specific, we need to be able to find your project)

ADDRESS _____
Number, Street, City, State, Zip

This project is located between _____ and _____
Street/Road Street/Road

Special directions _____

CITY: _____ PROPERTY CODE #: **2753-** - -

2. PROPERTY OWNER OR LESSEE:

NAME _____

ADDRESS _____

HOME PHONE _____ NUMBER, STREET, CITY, STATE, ZIP _____
WORK PHONE _____ FAX _____

3. CONTRACTOR INFORMATION (keep in mind that all contractors offering to do work which totals \$600 or more for labor and materials must have a State of Michigan license. The following information is required) If you need more space than provided you may include a separate sheet of paper.

NAME OF CONTRACTOR _____

ADDRESS _____

PHONE _____ NUMBER, STREET, CITY, STATE, ZIP _____
FAX _____

LICENSE NUMBER _____ EXPIRATION DATE _____

Federal employee ID number or reason for exemption _____

Workers compensation insurance carrier or reason for exemption _____

MESC employer number or reason for exemption _____

NAME OF CONTRACTOR _____

ADDRESS _____

PHONE _____ NUMBER, STREET, CITY, STATE, ZIP _____
FAX _____

Federal employee ID number or reason for exemption _____

Workers compensation insurance carrier or reason for exemption _____

MESC employee number or reason for exemption _____

4. ARCHITECT OR ENGINEER INFORMATION (when applicable)

NAME OF ARCHITECT OR ENGINEER _____

ADDRESS _____

PHONE _____ NUMBER, STREET, CITY, STATE, ZIP _____
FAX _____

5. TYPE OF COMMERCIAL PROPERTY IMPROVEMENT:

Use Group _____ Construction Type _____ Occupant Load _____ No. of stories _____

_____ Addition, used as _____ Alteration
_____ New Building, used as _____ Sign

How many off street parking spaces: _____ enclosed _____ outdoors

THE PROJECT WILL CONSIST OF: (separate permits are required for each roof structure)

- _____ Stick built home
 - _____ with attached garage
- _____ State of Michigan approved manufactured home, Serial numbers (when available) _____
 - _____ with attached garage
- _____ HUD approved mobile/doublewide, Title numbers (when available) _____
 - _____ With attached garage
- _____ Addition
- _____ Alteration/remodel
- _____ Deck /Porch
 - _____ with a roof structure _____ without a roof structure
- _____ Garage
 - _____ detached _____ attaching to existing residence
- _____ Pole building
- _____ Storage building/utility building/accessory building—frame construction
- _____ Pool
 - _____ below ground _____ above ground
- _____ Fire job
- _____ Pre-Sale Inspection
- _____ Demolition, most recent use _____

6. PLEASE ANSWER THE FOLLOWING QUESTIONS:

The foundation will be: _____ full basement _____ crawl space _____ floating slab
_____ pole _____ piers _____ trench
_____ poured concrete walls _____ block walls _____ wood

The principal type of frame will be: _____ wood _____ post _____ masonry
_____ structural steel _____ other

The principal type of heating fuel: _____ natural gas _____ propane gas _____ fuel oil
_____ electric _____ other

The type of water supply is: _____ private _____ public system

The type of sewage disposal is: _____ private _____ public system

The number of bedrooms involved: _____

The number of bathrooms involved: _____ full _____ half _____ unisex
(Commercial)

Will this project have an elevator? _____ yes _____ no

Will this project have a fire suppression system? _____ yes _____ no

Will this project have a fireplace? _____ yes _____ no
 If yes, what kind? _____ masonry
 _____ pre-manufactured zero-clearance
 _____ pre-manufactured gas burning

STRUCTURAL ELEMENTS:

This project will use: _____ truss' spaced _____" on center (provide manufacturers engineering)
 _____ rafters _____" x _____" spaced _____" on center

Exterior walls: _____ 2" x 4" spaced _____" on center
 _____ 2" x 6" spaced _____" on center

Floor joists: _____ 2" x 6" spaced _____" on center
 _____ 2" x 8" spaced _____" on center
 _____ 2" x 10" spaced _____" on center
 _____ 2" x 12" spaced _____" on center
 _____ TJI's (provide manufacturers engineering)

Support Columns: _____ wood _____ x _____ spaced _____" on center
 _____ steel _____ diameter _____ other spaced _____" on center

7. DIMENSIONS OF PROJECT:

OFFICE USE ONLY/FEEES FOR BUILDING PLAN REVIEW

| Base fee | | | | | |
|-------------------------------------|-------------------------------|-----------------|--|--|--|
| Basement, unfinished | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Basement, finished | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| _____ cement slab _____ crawl space | | | | | |
| Main floor | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Upper level or loft area | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Garage | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| _____ attached _____ detached | | | | | |
| Pole building | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Utility/accessory building | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Alteration/remodel | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Deck, with a roof structure | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Without a roof structure | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Porch, with a roof structure | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Without a roof structure | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Pool | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Fire job | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |
| Other | _____ x _____ = _____ sq. ft. | x _____ = _____ | | | |

TOTAL SQUARE FOOTAGE OF PROJECT _____ SQ.FT.

YOUR ESTIMATED COST OF THIS PROJECT (should include building, electrical, mechanical & plumbing) \$ _____

-Continue on page 4-

8. Any Construction within 500 feet of any water body, any construction area or land clearing work larger than one acre of land. A **GOGEBIC COUNTY SOIL EROSION PERMIT IS REQUIRED.**

My project is approximately _____ feet from a lake, river, stream or county drain. My soil erosion permit number is _____.

The bottom of the lowest horizontal structural member of this project will be approximately _____ feet above summer lake level.

This project is in a flood hazard area; my DEQ permit number is _____. The 100 year floodplain elevation or rise at this location is _____ determined by _____.

Since my project is in a floodplain hazard area, I understand that certain building restrictions and regulations will apply. Before construction begins, I must have a registered surveyor create an on site bench mark, upon completion and before occupancy of this project I must submit a certificate of as-built elevation from a registered land surveyor.

Signature _____ Date _____

10. **APPLICANT INFORMATION:**

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

I hereby certify that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/hers 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, 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.

(This means, it is illegal in the State of Michigan to hire or use unlicensed people to perform work for you.)

DATE _____

SIGNATURE OF APPLICANT (Be sure you understand the above)

ADDRESS _____

Number, Street, City, State, Zip

PHONE _____

11. **LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS INFORMATION:**

The building official of the City of Wakefield has completed the necessary review on the above application along with submitted documents and is approving that the permit be issued.

BUILDING OFFICIAL'S
SIGNATURE _____

DATE _____

COMMENTS:

Donald "Butch" Saari
Building Inspector
(906)932-5979
(906)364-1277