

3338 Coolidge Berkley, Michigan 48072 (248) 658-3320 FAX (248) 658-3321 www.berkleymich.org

BUILDING PERMIT APPLICATION

Application for a Commercial Re	permit to: esidential Demo_	New Construction	Additio	on Alteration	_ SPRINKLED Y / N
Describe Propose	ed Project:				
Work being done at: Address: Name of Property Owner:			Size of New Structure:		
Zoning:	Subdivision:			Lot No.:	Lot Size:
		Ci			
Telephone:		EMAIL Addr	ess:		
Requirements: A copy of your insur Residential: One (1) New Home Residenti Commercial: Two (2) PDF I agree to repair ar "This permit is gr ordinances of this and may be revoluted.	ance must be on file for 11x17 set of plans, minifial: Two (2) sets of plans sets of plans (one (1) sets of plans (one to plans) damage done to proper signification including the control of the expression of th	mr reviews will not be a rall contractors doing we mum size 8 1/2 x 11 inch per (one (1) set of plans to be et to be 11x17), sealed by a AN of plans are required to be ublic or private property as condition that the set in violation of any province.	refunded ork in our paper. 11x17) Licensed / D be subn // said cons nce, reg	d. Architect or Engineer in hitted to: building@ struction shall, in a ulating the constru	III respects, conform to the action and use of buildings,
Signature		Prin	t Name		
		d permits with no inspecti unded after inspections h			ne permit costs with a minimum
Department use on	ly: USE GROUP	CONST. TYPE	\	/alue by Department: §	\$
Approved		Not Approved		Date Fee:	
Permit Number:				Inspections	s:
Stipulations:				Bond: Registratio Plan Revie Total:	
Received by		Date		i Ulai.	

CONTRACTOR PERMITS

Company Name:			
Street Address:			
City:	State:	Zip:	
License Number:	Expiration	Date:	<u> </u>
Drivers License Number:		DOB:	
Federal Employer ID Number or Reason for Exemption:			
Workers Comp Insurance Carrier or Reason for Exemption:			
MESC Employer Number or Reason for Exemption:			
"Section 23a of the state construction 125.1523a of the Michigan Compiled requirements of this state relating to Violations of section 23a are subjection 23a"	l Laws, prohibits a person f p person who perform work	rom conspiring to circumvent the li	icensing
A copy of your certificate of insuran	ce must be on file with the	ouilding division before any permit	s will be issued.
Signature of Contractor		Date signed	-
	HOMEOWNER PEI	RMITS	
Name:			
Street Address:			
City:	State:	Zip:	
Drivers License Number:		DOB:	
Telephone Number:	Email:		
Section 23a of the state constructio 125.1523a of the Michigan Compiled requirements of this state relating to Violations of section 23a are subjec	l Laws, prohibits a person f p person who perform work	rom conspiring to circumvent the li	icensing
Homeowner guarantees that work is out; also this will not be a rented pro		or immediate family and will not b	e contracted
Signature of Homeowner		Date signed	-