Building Permit Application
Mason County Building Dept.
102 E. 5th St.
Scottville, MI 49454
(231)757-9345 or (231)757-9272

www.masoncounty.net

APPLICANT TO COMPLETE ALL ITEMS IN SECTIONS I, II, III, IV, V AND VI

NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR PLUMBING, MECHANICAL AND ELECTRICAL WORK PERMITS

I. Project Information								
Project name (if applicable)			Address of building site					
Name of City, Village or Township in which job is located			Section	Section		Zip Code		
City Village Tov	vnship OF:							
Nearest crossroads/special directions								
II Identification								
II. Identification A. Owner or Lessee								
Name			Address					
City	State	Zip C	Zip Code		Telephone # (include Area Code)			
B. Architect or Engineer								
Name		Address						
C'I	T c				T=1.1. #6			
City	State	Zip C	Zip Code		Telephone # (include Area Code)			
License Number		Expiration Date						
C. Contractor								
Name		Address						
City	State	7iı	Zip Code		Telephone # (Include Area Code)			
		2.p code		,				
Builders License Number		Expiration Date						
		'						
Federal Employer ID Number (or reason for exemption)								
Workers Comp Insurance Carrier (or reason for exemption)								
UIA Number (or reason for exemption)								
III. Type of Improvement and Plan Review								
A. Type of Improvement								
1. New Building	3. Alteration 5. Demoliti	ion		_		Relocation		
	1. Repair 6. Mobile F	Home Set-up 🔲 8. Prei		8. Prem	anufacture 10	. Special Inspection		
B. Plan Review Required								
Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, except as listed below Engineered Plans are not required for alterations and repair work determined by the building official to be of a minor nature & residential under								
3,500 sf, however, a hand drawn floor plan shall be required.								
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.								

IV. Proposed Use of Building								
A. Residential								
1. One Family	3. Hotel, Motel	5. Detached Garage/Pole Building						
No. of Bedrooms	No. of Units	C Other						
2. Two or More Family No. of Units	4. Attached Garage	6. Other						
B. Non-Residential	11. Service Station	15 School Library Educational						
7. Amusement		15. School, Library, Educational						
8. Church, Religion	12. Hospital, Institutional	16. Store, Mercantile						
9. Industrial	13. Office, Bank, Professional	17. Tanks, Towers						
10. Parking Garage	14. Public Utility	18. Other						
Residential – Describe in detail proposed project e.g. new dwelling, addition, garage, pole building, decks/porches Non-Residential – Describe in detail proposed use of building e.g. Food Processing Plant, Machine Shop, Laundry Building at Hospital, Elementary/Secondary /Parochial School, College, Parking Garage for Department store, Rental Office Building, Office building at Industrial Plant. If use of existing building is being changed, enter proposed use.								
V. Selected Characteristics of Building								
A. Principal Type of Frame								
1. Masonry, Wall Bearing 2. Wood Fra	me 3. Structural Steel 4. Rei	inforced Concrete 5. Other						
B. Principal Type of heating Fuel								
☐ 6. Gas ☐ 7. Oil	8. Electricity 9. Pro	ppane 10. Other						
C. Type of Sewage Disposal								
11. Public or Private Company	12. Septic System							
D. Type of Water Supply								
13. Public or Private Company	14. Private Well or Cistern							
E. Type of Mechanical								
15. Will there be air conditioning? Yes	No 16. Will there be Fire Suppr	ession? Yes No						
F. Dimensions/Data (Give Dimensions in Lengt)								
The Billion of Bata (Give Billions in Eculy)	Tana Watin							
17. Number of Stories	21. Floor Area Exis	sting Alterations New						
	Basement							
18. Height to Peak	Finished/Unfinished							
19. Garage/Pole Building	1 st Floor							
20. Decks/Porches	2 nd Floor							
21. Estimated Cost \$	Other							
	Total Area (in Sq. Ft.)							
G. Number of Off Street Parking Spaces								
G. Hamber of On Street Farking Spaces								
22. Enclosed	23. Outdoors							

VI. Applicant Information							
APPLICANT IS RESPONSIBLE FOR		LL FEES AND C	CHARGES APPLICAB	SLE TO THIS AP	PLICATION	AND MUST	
PROVIDE THE FOLLOWING INFO	RMATION.						
Name			Address				
City	State		Zip Code		Telephone # (include Area Code)		
						(
Funcil address.							
Email address:							
I hereby certify that the propose	d work is authorized	by the owner o	of record and that I	have been au	thorized by	the owner to make	
this application as his/her author		-			-		
submitted on this application is a	_	_			_		
Section 23a of the state cor	struction code act of	f 1972, 1972 P	S 230, MCL 125.15	23a, prohibits	a person fro	om	
conspiring to circumvent th	is licensing requirem	ents of this sta	ate relating to pers	ons who are t	o perform v	work on	
a residential building of a re	esidential structure.	Violators of se	ection 23a are subj	ected to civil f	ines.		
SIGNATURE OF APPLICANT							
		_	TE: THIS IS THE AP		_	_	
Building Fee \$	(Call for am	nount)		PERMIT WILL	BE MAILED	TO YOU AFTER	
(231) 757-9272 or VII. Local governmental Agency		tion	APPROVAL				
VII. Local governmental Agency	•		ntrol Approvals				
	Required?	Approved	Date	Numb	er	Ву	
A – Zoning	Yes no		2000		<u></u>	-1	
B – Address	Yes No						
C – Septic/Well	Yes No						
D – Soil Erosion	Yes No						
E – Natural River/DNRE							
F – Critical Dunes/DNRE	Yes No						
G – MCRC/MDOT Driveway Cut	Yes No						
H – Public Works/Sewer	Yes No						
I – Variance Granted	Yes No						
J – Other	Yes No						
Expiration of Permit:							
•							
A PERMIT MAY BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF							
ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. AFTER THE FIRST YEAR, THE							
CHARGE FOR PERMIT RENEWAL FOR AN ADDITIONAL 180 DAYS IS \$40. PLEASE CONTACT THE BUILDING INSPECTOR (757-9345							
EXT. 315) IF UNIQUE CIRCUMSTANCES ARISE THAT MAY REQUIRE MORE THAN ONE RENEWAL.							
Mason County will not discriminate against any individual or group because of race, sex, religion, national origin, color, marital							
status handican or political heliefs							

