



Grand Haven Department of Public Safety
Building and Code Division
525 Washington Avenue, Grand Haven, MI 49417
Phone: (616) 842-3460 Website: www.grandhaven.org



Residential 1 or 2 Family Building Permit Application

Separate Applications Must be Completed for Plumbing, Mechanical, or Electrical Work Permits

I. Job Location									
Job Location							Date		
Parcel #									
II. Property Owner Information									
Name					Address				
City			State		Zip		Email		
Daytime Phone			Cell				Fax		
III. Builder/Contractor/Licensee Information									
Company Name			Company Address			City		State	Zip
Business Phone			License Name				Cell		
Email			Fax				Date of Birth		
Driver's License #			State Builder's License #				Expiration Date		
Federal ID # (or reason for exemption)			Workers Comp (or reason for exemption)				UIA Employee # (or reason for exemption)		
IV. Architect or Engineer									
Name			Address						
City			State		Zip		Business Phone		
Email			State Architect or Engineering License #					Expiration Date	
V. Project Description									
A. Type of Improvement									
<input type="checkbox"/> NEW BUILDING <input type="checkbox"/> ADDITION		<input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR		<input type="checkbox"/> BASEMENT FINISH <input type="checkbox"/> DECK		<input type="checkbox"/> FOUNDATION ONLY <input type="checkbox"/> PREMANUFACTURE		<input type="checkbox"/> MOBILE HOME SET-UP <input type="checkbox"/> SPECIAL INSPECTION	
B. Residential Building Regulated by the Michigan Residential Code									
<input type="checkbox"/> ONE FAMILY <input type="checkbox"/> TWO FAMILY			<input type="checkbox"/> ATTACHED GARAGE <input type="checkbox"/> DETACHED GARAGE				<input type="checkbox"/> OTHER _____		
C. Detailed Description of Work (REQUIRED; include all interior and exterior work)									
D. Value of Construction Project									
Total value of project:									
\$									

E. Dimensions / Data				
Square Foot Breakdown	Finished	Unfinished	Total	Building Setbacks
Basement				Front
1 st Floor				Rear
2 nd Floor				Side 1
Half Story				Side 2
F. Select Characteristics of Building				
1. Principal type of framing: <input type="checkbox"/> Wood Frame <input type="checkbox"/> Structure Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Concrete <input type="checkbox"/> Other				
2. Principal type of heating fuel: <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electricity <input type="checkbox"/> Hydronic <input type="checkbox"/> Other _____ <input type="checkbox"/> N/A				
3. Type of sewage disposal: <input type="checkbox"/> Public or Private Company <input type="checkbox"/> Septic System				
4. Type of water supply: <input type="checkbox"/> Public or Private Company <input type="checkbox"/> Private Well or Cistern				
5. Will there be air conditioning: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what type of system? <input type="checkbox"/> Coil/Condenser <input type="checkbox"/> Hydronic				
6. Energy Code Compliance Pathway <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> Energy Rating Index				
VI. Plan Review Required				
Detailed construction documents must be submitted with any application for a building permit, unless waived by the building official when code compliance can be determined based on the description in the application, and the appropriate fee(s) must be paid in full before a permit can be issued. Construction documents must be sealed and signed by an architect or professional engineer in accordance with 1980, PA 299 as amended. The seal and signature is not required for one and two family dwellings less than 3,500 square feet of calculated floor area and public works less than \$15,000 in total construction cost. The building official also reserves the right to require architect or engineer supervision on any other construction method deemed unusual or non-typical.				

VII. Zoning/Land Use Requirements	
For all projects that require a building permit, a zoning/land use review is required. Separate fees will be assessed for a zoning/land use review. A site plan, building elevations, and floor plans may be required to demonstrate compliance with the Zoning Ordinance. Some improvements may also require approval by the Planning Commission. Any work in the City right-of-way will require a separate application and review from the Department of Public Works. An inspection may also be required.	
1. Proposed Improvements: <input type="checkbox"/> Grading <input type="checkbox"/> New/Expanded Driveway <input type="checkbox"/> Retaining Wall(s) <input type="checkbox"/> Patio/Deck <input type="checkbox"/> Change of Use <input type="checkbox"/> Building Footprint Expansion <input type="checkbox"/> Building Height Increase <input type="checkbox"/> Accessory Building(s) <input type="checkbox"/> Other _____	
2. Sensitive Areas Overlay Review: Projects in the Sensitive Areas Overlay District may require a separate permit and fee. The Michigan Department of Environment, Great Lakes, & Energy (EGLE) may also require a separate permit. <input type="checkbox"/> Critical Dune Area <input type="checkbox"/> Wetland <input type="checkbox"/> Floodplain <input type="checkbox"/> Other _____	
3. Work in City Right-of-Way: <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, contact the Department of Public Works at (616) 847-3493	

VIII. Builder's Affidavit	
<i>Section 23a of the State Construction Code Act of 1972, 1972 PA 230, MCL 125.1523A, 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.</i> <i>I hereby certify that the proposed building work is authorized by the owner of record and that I have been authorizing by the owner to make this application as his/her 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.</i>	
Signature of Licensee	Date

IX. Homeowner Affidavit	
<p><i>I hereby certify the work described in this permit application shall be done by myself on my own dwelling in which I am living, or about to occupy. All work shall be done in accordance with the codes and shall not be backfilled, enclosed, dry walled, covered-up, or used until it has been inspected or approved by the appropriate inspector. I understand my responsibility to arrange for the required inspections and I agree not to move anything into, or use the building in any way, until I have received written approval to do so from the appropriate inspector.</i></p> <p><i>I understand that for any such affidavit connected to a building permit, I (or appropriate licensed contractors) am required to obtain additional permits before installing any electrical, plumbing, heating, air conditioning, fireplace, wood stove, ventilation component, or other similar work. I understand all of the above and acknowledge that failure to comply with the above requirements may cause revocation of the building permit and/or legal action to be taken against me.</i></p>	
Signature of Homeowner	Date

Zoning/Land Use Approval (to be completed by local governing agency)	
<input type="checkbox"/> Conforming Use <input type="checkbox"/> Non-Conforming Use	Rental? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, <input type="checkbox"/> Long Term <input type="checkbox"/> Short Term
Zoning District Information	PC/ZBA Case
Zoning/Land Use Approval Signature	Date Approved
Notes/Stipulations	

Building Approval (to be completed by local governing agency)	
Use Group	Size of Building (Total Sq. Ft.)
Type of Construction	
Number & Type of Inspections	
Building Approval Signature	
Title	Date

"Final project valuation will be determined by consulting the State of Michigan Bureau of Construction Codes or International Code Council valuation schedules."

Email Completed Application to: GHDPSSBuilding@grandhaven.org