



# BUILDING PERMIT APPLICATION

## Charter Township of Orion Building Department

2525 Joslyn Road, Lake Orion, MI 48360

Phone 248-391-0304 ext. 6000 Fax 248-391-1454

### I. LOCATION OF BUILDING

ADDRESS		ZIP CODE
SUBDIVISION	LOT#	SIDWELL#
ZONING	ESTIMATED COST OF CONSTRUCTION \$	
		SQUARE FOOTAGE

### II. APPLICANT

<input type="radio"/> OWNER	<input type="radio"/> LESEE	<input type="radio"/> ARCHITECT	<input type="radio"/> ENGINEER	<input type="radio"/> CONTRACTOR
CONTACT			TELEPHONE NO.	

### III. OWNER / LESSEE

NAME			TELEPHONE NO.
ADDRESS	CITY	STATE	ZIP CODE
<b>EMAIL ADDRESS</b>			FAX NO.

### IV. ARCHITECT / ENGINEER

NAME			TELEPHONE NO.
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NUMBER			EXPIRATION DATE
<b>EMAIL ADDRESS</b>			FAX NO.

### V. CONTRACTOR

NAME			TELEPHONE NO.
ADDRESS	CITY	STATE	ZIP CODE
BUILDERS LICENSE NUMBER			EXPIRATION DATE
<b>EMAIL ADDRESS</b>			FAX NO.

### VI. PROPOSED USE OF BUILDING

<b>A. RESIDENTIAL</b>				
<input type="radio"/> SINGLE FAMILY	<input type="radio"/> MULTI-FAMILY (NO. OF UNITS _____)	<input type="radio"/> ATTACHED GARAGE	<input type="radio"/> DETACHED ACCESSORY BLDG.	
<input type="radio"/> OTHER (SPECIFY) _____ (NEW RESIDENTIAL ONLY - NUMBER OF BEDROOMS _____ NUMBER OF BATHROOMS - FULL _____ PARTIAL _____)				
<b>B. NON-RESIDENTIAL</b>				
<input type="radio"/> COMMERCIAL	<input type="radio"/> INDUSTRIAL	<input type="radio"/> MEDICAL	<input type="radio"/> OFFICE / PROFESSIONAL	<input type="radio"/> STORE / MERCANTILE
<input type="radio"/> TOWER	<input type="radio"/> SIGN	<input type="radio"/> OTHER (SPECIFY) _____		

### VII. PROJECT DESCRIPTION


### VIII. TYPE OF IMPROVEMENT

<input type="radio"/> NEW BUILDING	<input type="radio"/> ALTERATION	<input type="radio"/> MOBILE HOME SET-UP	<input type="radio"/> OTHER SPECIFY _____
<input type="radio"/> ADDITION	<input type="radio"/> REPAIR	<input type="radio"/> DECK	<input type="radio"/> FOUNDATION ONLY
<input type="radio"/> ACCESSORY STRUCTURE	<input type="radio"/> DEMOLITION	<input type="radio"/> POOL	<input type="radio"/> IN GROUND <input type="radio"/> ABOVE GROUND

**IX. ENVIRONMENTAL**

**A. PRINCIPAL TYPE OF SEWAGE DISPOSAL**

PUBLIC  SEPTIC SYSTEM

**B. PRINCIPAL TYPE OF WATER SUPPLY**

PUBLIC  PRIVATE WELL

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS 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.

SECTION 23a OF THE STATE CONSTRUCTION CODE ACT OF 1972, 1972 PA 230, MCL 125.15239, 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.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_

**OFFICE USE ONLY**

**FEES**

REGISTRATION	\$ _____
APPLICATION	\$ _____
PLAN REVIEW	\$ _____
PERMIT FEES	\$ _____
<b>TOTAL</b>	\$ _____

**INFORMATION**

TYPE	_____
USE GROUP	_____
SQUARE FOOTAGE	_____
<b>PROJECT #</b>	_____

**COMMERCIAL (NEW/EXISTING) AND NEW RESIDENTIAL APPLICANTS  
PLEASE CONTACT ORION TOWNSHIP PUBLIC WORKS FOR WATER AND SEWER FEES  
248-391-0304 EXT. 7003  
WATER/SEWER FEES MUST BE PAID PRIOR TO ISSUING YOUR BUILDING PERMIT**