

Sodus Township

BUILDING DEPARTMENT

www.sodustwp.org

4056 King Dr Sodus, MI 49126 269-208-9230

APPLICATION FOR BUILDING PERMIT

APPLICANT TO COMPLETE SECTIONS I, II, AND III

Property ID:

NOTE: SEPARATE APPLICATIONS MUST BE MADE FOR ELECTRICAL, MECHANICAL, PLUMBING & ZONING PERMITS.

I. APPLICANT IDENTIFICATION

A. JOB ADDRESS:

B. OCCUPANT NAME:

C. OWNER NAME:

MAILING ADDRESS

CITY

STATE

ZIP CODE

E-MAIL ADDRESS:

TELEPHONE/MOBILE CELL

D. CONTRACTOR NAME:

MAILING ADDRESS:

CITY

STATE

ZIP CODE

E-MAIL ADDRESS:

TELEPHONE/MOBILE CELL

FAX

BUILDERS

LICENSE #:

21-

EXPIRATION DATE

WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION

FEDERAL EMPLOYER ID NUMBER OR
REASON FOR EXEMPTION

MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION

II. PROJECT DESCRIPTION

A. TYPE OF PROJECT:

- Residential
 Commercial
 Industrial
 Other

REPAIR /REPLACEMENT

REMODEL

INT. EXT.
(CIRCLE ONE)

FENCE LOCATION:
(COMMERCIAL ONLY)

FRONT REAR SIDE

**NOTE: RESIDENTIAL FENCES AND SHEDS
UNDER 200 SF MUST BE APPLIED FOR
UNDER A ZONING PERMIT.**

WORK DESCRIPTION:

III. APPLICANT / AUTHORIZED AGENT INFORMATION

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:

NAME

TELEPHONE

ADDRESS

CITY

STATE

ZIP CODE

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/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.

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 structure. Violators of Section 23a are subject to civil fines.

ESTIMATED COST OF PROJECT: \$

SIGNATURE OF:
 OWNER
 CONTRACTOR
 AGENT

IV. PAYMENT VALIDATION/APPROVAL (FOR DEPARTMENT USE ONLY)

PERMIT FEE: \$

PLAN REVIEW FEE:

APPROVAL SIGNATURE

METHOD OF

PAYMENT: CASH CHECK CREDIT/DEBIT CARD

BUILDING
PERMIT # **PB**

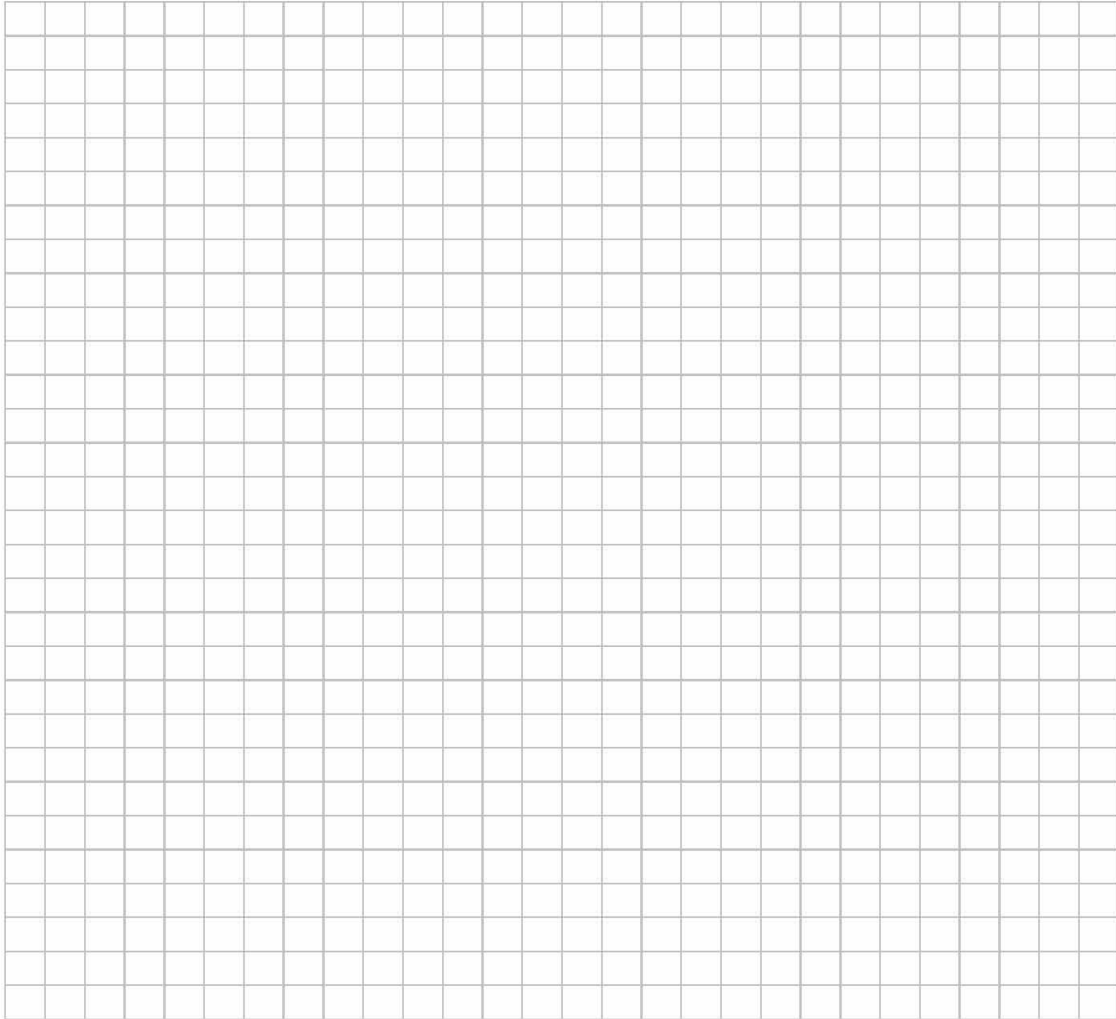
SODUS TWP BUILDING OFFICIAL

DATE

PLEASE INDICATE STREET NAME IN BORDER

Plot Plan

(Remember to show streets, all structures, easements, fences, gates, pavement, electrical lines & property lines.)



Sample of Plot Plan:

