

**APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION
CITY OF MIDLAND-BUILDING DEPARTMENT
333 W. ELLSWORTH ST. MIDLAND, MI 48640 (989-837-3383, fax-989-835-2378)**

**NOTE: SEPARATE APPLICATIONS MUST BE SUBMITTED FOR PLUMBING, MECHANICAL & ELECTRICAL.
COMPLETION MANDATORY TO OBTAIN PERMIT**

1. PROJECT ADDRESS _____ OWNER _____

OWNERS ADDRESS
IF DIFFERENT _____ PHONE # _____

2. CONTRACTOR _____ LICENSE # &
EXPIRATION DATE _____

PHONE # _____ EMAIL
ADDRESS _____ ADDRESS _____

ARCHITECT STATE
3. ENGINEER _____ REGISTRATION # _____

PHONE # _____ EMAIL
ADDRESS _____ ADDRESS _____

4. VALUE OF PROJECT _____ PROJECT DESCRIPTION _____

PRINCIPLE TYPE OF CONSTRUCTION:

RESIDENTIAL: SINGLE FAM _____ DUPLEX _____ CONDOMINIUM _____ NEW CONSTRUCTION _____ ADDITION _____ REMODEL _____

COMMERCIAL: NEW CONSTRUCTION _____ ADDITION _____ REMODEL _____

BEARING WALLS: MASONRY/ _____ WOOD FRAME _____ STRUCTURAL STEEL _____ REINFORCED CONCRETE _____ OTHER _____

FOUNDATION: CRAWL _____ FULL BSMT _____ SLAB ON GRADE _____ WOOD _____ BLOCK _____ POURED CONCRETE _____ OTHER _____

MISC INFO: # OF STORIES _____ USE GROUP _____ TYPE CONSTRUCTION _____ # OF OCCUPANTS _____ FIRE SPRINKLERS INSTALLED _____

PARKING: # OUTDOOR PARKING _____ # BARRIER FREE PARKING _____ # COVERED PARKING _____

FLOOR AREA:

BSMT (FINISHED) _____ (UNFINISHED) _____ 1ST FLOOR _____ 2ND FLOOR _____ 3RD FLOOR _____ GARAGE _____

**THE DEPARTMENT WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL
ORIGIN, COLOR, MARITAL STATUS, HANDICAP OR POLITICAL BELIEFS.**

**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.**

AUTHORITY: PA 230 OF 1972, AS AMENDED.

**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 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.**

**SIGNATURE OF
APPLICANT:** _____

DATE: _____