

# CLARK TOWNSHIP

PO Box 367 • Cedarville, MI 49719 • (906) 484-2672

Building and Zoning Inspector

**Ken Waybrant**

inspector@clarktwp.org

Make Check Payable to: **Clark Township**

Date of Application: \_\_\_\_\_

Permit No. \_\_\_\_\_

**AUTHORITY COMPLETION PENALTY : P.A.230 OF 1972 AMENDED**  
Mandatory to obtain permit: application must be completed,  
signed, and proper fee enclosed, or permit will not be issued

The Department of Labor will not discriminate against any  
individual or group because of race, sex, religion, age, national  
origin, color, marital status, handicap or political beliefs.

## APPLICANT TO COMPLETE ALL ITEMS

**NOTE: SEPARATE APPLICATIONS MUST BE MADE TO THE APPROPRIATE DIVISION FOR PLUMBING,  
ELECTRICAL AND MECHANICAL WORK PERMITS.**

### I. LOCATION OF BUILDING

Address: \_\_\_\_\_

Village: \_\_\_\_\_

Township: \_\_\_\_\_

County: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Between \_\_\_\_\_

and \_\_\_\_\_

### II. IDENTIFICATION

#### A. Owner or Lessee

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip \_\_\_\_\_

#### B. Architect or Engineer

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

License No. \_\_\_\_\_

Expiration date: \_\_\_\_\_

#### C. Contractor

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Builder's License No. \_\_\_\_\_

Expiration date: \_\_\_\_\_

### III. TYPE OF IMPROVEMENT AND PLAN REVIEW

#### A. Type of Improvement

1. New Building \_\_\_    3. Alteration \_\_\_    5. Wrecking \_\_\_    7. Foundation only \_\_\_    9. Relocation \_\_\_  
2. Addition \_\_\_    4. Repair \_\_\_    6. Mobile Home Setup \_\_\_    8. Pre-Manufacture \_\_\_

#### B. Review(s) to be performed

Building \_\_\_\_\_    Other \_\_\_\_\_

**IV. SELECTED CHARACTERISTICS OF BUILDING**

**A. Principle Type of Frame**

1. Masonry \_\_\_\_\_ 2. Wood Frame \_\_\_\_\_ 3. Structural Steel \_\_\_\_\_ 4. Reinforced Concrete \_\_\_\_\_ 5. Other \_\_\_\_\_  
Wall Bearing

**B. Principle Type of Heating Fuel**

6. Gas \_\_\_\_\_ 7. Oil \_\_\_\_\_ 8. Electricity \_\_\_\_\_ 9. Coal \_\_\_\_\_ 10. Other \_\_\_\_\_

**C. Type of Sewage Disposal**

11. Public or Private \_\_\_\_\_ 12. Septic System \_\_\_\_\_

**D. Type of Water Supply**

13. Public or Private Company \_\_\_\_\_ 14. Private Well or Cistern \_\_\_\_\_

**E. Type of Mechanical**

15. Air Conditioning: Yes \_\_\_\_\_ No \_\_\_\_\_ 16. Elevator: Yes \_\_\_\_\_ No \_\_\_\_\_

**F. Dimensions**

17. Number of stories \_\_\_\_\_ 18. Floor Area: 1st and 2nd Floors: \_\_\_\_\_  
3rd and 10th Floors: \_\_\_\_\_  
11th-- above Floors: \_\_\_\_\_  
Total Land Area (Sq. Ft.) \_\_\_\_\_ Total Area: \_\_\_\_\_

**G. Number of Off Street Parking Spaces**

19. Enclosed: \_\_\_\_\_ 20. Outdoors: \_\_\_\_\_

**V. APPLICANT INFORMATION**

**Applicant is responsible for the payment of all fees and charges of this application and must provide the following information**

Name:		Telephone:	
Address:	City:	State:	Zip:

**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 person(s) who are to perform on a residential building or a residential structure. Violators of Section 23A are subject to civil fines.**

Signature of Applicant:	Date:
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### Residential Fee Schedule

Detached Single Family Residence		Base Fee +	Number of Square Feet	X	= Fee per Item
House	(4 Inspections)	\$50 +		.12	
Modular Home	(3 Inspections)	\$120	N/A	N/A	
Additions	(4 Inspections)	\$50 +		.12	
Enclosed Porch	(2 Inspections)	\$25 +		.05	
Detached garage, boat house or storage building	(2 Inspections)	\$20 +		.05	
Decks up to 60 sq.ft.	(1 Inspection)	\$20	N/A	N/A	
Decks larger than 60 sq. ft.	(1 inspection)	\$20 +		.03	
Car port, boat storage, covered porch, or pole building	(2 Inspections)	\$10 +		.05	
Remodeling	(2 Inspections)	\$40	N/A	N/A	
Mobile home or sectional	(2 Inspections)	\$100	N/A	N/A	

### Plan Review: Single Family Residential

	Value of Construction	X	(minimum)	= Fee
A. Residence	\$	\$.00095	\$20.00	
B. Accessory Building (s)	\$	\$.00075	\$10.00	
<b>Permit Administration Fee</b>				<b>\$50</b>
<b>Residential Building Permit Grand Total:</b>				<b>\$</b>

### Commercial Fee Schedule

Commercial		Base Fee +	Number of Square Feet	X	= Fee per item
Commercial Building	(5 Inspections)	\$60 +		\$.15	
Remodeling	(4 Inspections)	\$50 +		\$.05	
Special or Additional Inspections	# of Additional Inspections		Quantity	\$20.00	

### Plan Review: Commercial Building

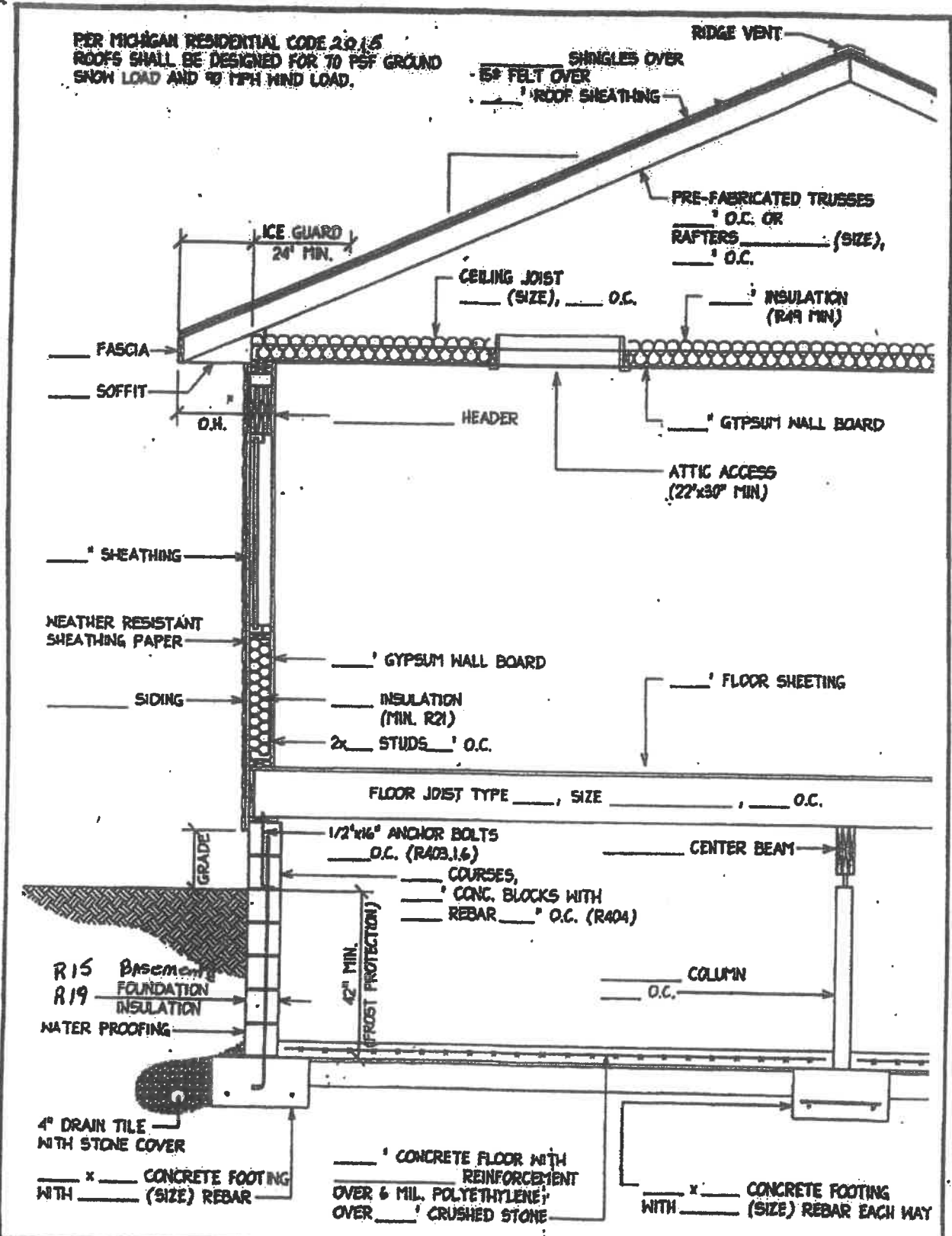
	Value of Construction	X	+ Base Fee	= Fee
A. Value up to \$500,000	\$	\$.001	N/A	
B. Value more than \$500,000	\$	\$.001	\$750.00	
<b>Permit Administration Fee</b>				<b>\$25</b>
<b>Commercial Building Permit Grand Total</b>				

<b>VI. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION</b>					
<b>Environmental Control Approvals</b>					
	Required	Approved	Date	Number	By
A. Zoning	<input type="checkbox"/> Yes <input type="checkbox"/> No				
B. Fire District	<input type="checkbox"/> Yes <input type="checkbox"/> No				
C. Pollution Control	<input type="checkbox"/> Yes <input type="checkbox"/> No				
D. Noise Control	<input type="checkbox"/> Yes <input type="checkbox"/> No				
E. Soil Erosion	<input type="checkbox"/> Yes <input type="checkbox"/> No				
F. Flood Zone	<input type="checkbox"/> Yes <input type="checkbox"/> No				
G. Water Supply	<input type="checkbox"/> Yes <input type="checkbox"/> No				
H. Septic System	<input type="checkbox"/> Yes <input type="checkbox"/> No				
I. Variance Granted	<input type="checkbox"/> Yes <input type="checkbox"/> No				
J. Other	<input type="checkbox"/> Yes <input type="checkbox"/> No				

<b>VII. VALIDATION--FOR DEPARTMENT USE ONLY</b>	
Notes and Data:	
Building Permit Number:	Approval Signature:
Issue Date:	
Permit Fee:	<b>Clark Township Building Inspector</b>

- Fee Schedule Effective as of May 1, 2007
- A Scale Drawing Must Be Submitted with Land Use Permit
- Other Documents May Be Required

Fill in the appropriate lines and return with your application.



Number of crawl space vents \_\_\_\_\_

Bedroom window size: Height from floor \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

Smoke Detector is MANDATORY - Brand \_\_\_\_\_

## **Notice to Applicant**

**The issuance of this building permit only signifies approval by Clark Township for the applicant to construct the structure described.**

**The applicant remains obligated to comply fully with all federal, state and local laws and regulations that pertain to all aspects of the construction and development of the property as described on the application.**

## Permit Required on Site before Start of Construction or Remodeling

The Building Inspector shall be notified **48 hours** in advance of the following:

1. Pouring of footings
2. Constructing foundations
3. Rough-in completion
4. Final (before occupancy)

**DO NOT START BUILDING UNTIL A BUILDING PERMIT IS POSTED ON SITE**

**This form is only an application. It is not a permit.**

Any work started before a permit is issued will result in a stop-work order until such time a permit is obtained.

A land use permit is required before any digging. Do not start digging until you have a Land Use Permit posted.

We need plans before a permit is issued. A complete layout of all floors and garage dimensions, location of windows, doors, rooms, basement/crawl space beams, stairs, etc. is needed.

**Costs of Improvement:**                         \$ \_\_\_\_\_

a. Electrical..... \$ \_\_\_\_\_

b. Plumbing ..... \$ \_\_\_\_\_

c. Heating/air conditioning .....\$ \_\_\_\_\_

d. Other (elevator, etc.)..... \$ \_\_\_\_\_

## **BUILDING PERMIT FEE SCHEDULE ADDENDUM**

### **Special Site inspections**

The Inspector will be available by appointment for Special Site Inspections at times outside of his two-day work schedule, as circumstances permit. The inspection charge for Special Inspections will be twice the normal rate, and the applicant will pay the Inspector's round-trip mileage from his home to the building site at the rate specified in the Clark Township Employee Policy Manual, which is the current rate set by the IRS.

A form will be provided for completion and will provide details of each Special Inspection done, indicating date, time, mileage, name and signature of the permit holder or his/her agent, etc. Compensation will depend upon submission of a satisfactorily completed form.

### **"After the Fact" Fees for Permits**

For proper approvals and tracking of projects, the State, Township and other agencies require permits be issued **prior to any** development activities or occupancy.

If it is discovered that projects were begun prior to receiving the proper permits, the regular permit fees will be **doubled** for work already commenced. Work that does not meet approvals or requirements will be denied and remediation will be at the expense of the property owner.

For habitual offenders with a history of beginning at least two projects prior to obtaining proper permits, the "After the Fact" fees will be **tripled**.



## **To Submit an Appeal to the Planning Commission or Zoning Board of Appeals**

If the Building Inspector/Zoning Officer denies your request for a permit, you may appeal that decision to either the Planning Commission (land use permits) or the Zoning Board Appeals (variance requests). To help expedite the process, please included the following items in your appeal:

1. Your permit that was denied by the Building Inspector/Zoning Officer
2. A letter stating the basis for the appeal with your signature
3. Site Plan. A hearing will not be scheduled until this is provided.
4. Appropriate appeal fee: a hearing will not be scheduled until this is paid.
5. If you are unable to attend the hearing, a letter authorizing a personal representative should be supplied.

When an appeal is submitted, a public notice must be posted in the St. Ignace News, and **it must be posted at least 15 days prior to the meeting\*** of either the Planning Commission or Zoning Board of Appeals. The Planning Commission meets on the second Tuesday of each month, and the Zoning Board of Appeals usually meets on the fourth Tuesday of the month if it has a case to determine.

Thank you for your cooperation.

\*Michigan Zoning Enabling Act, Act 11 of 2006