

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	
Permit Administration Fee				\$25
Residential Building Permit Grand Total: \$				

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

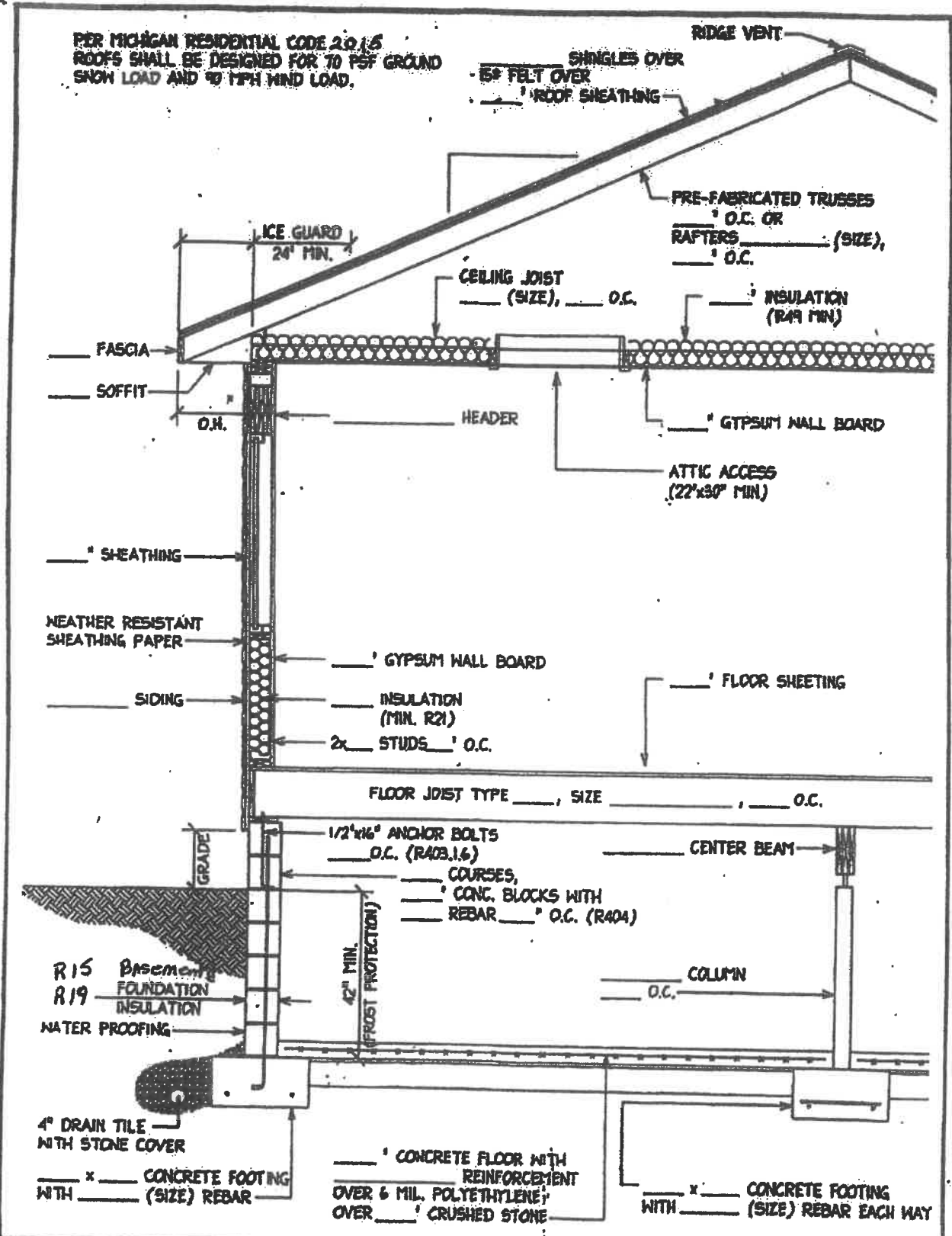
	Value of Construction	X	+ Base Fee	= Fee
A. Value up to \$500,000	\$	\$.001	N/A	
B. Value more than \$500,000	\$	\$.001	\$750.00	
Permit Administration Fee				\$25
Commercial Building Permit Grand Total				

VI. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION					
Environmental Control Approvals					
	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				

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

- 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.

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

**CLARK TOWNSHIP SEWAGE DISPOSAL SYSTEM PERMIT APPLICATION
FOR SEWER HOOK-UP IN COMPLIANCE WITH
CLARK TOWNSHIP SEWER ORDINANCE**

FILL OUT FORM COMPLETELY AND SUBMIT TO THE TREASURER'S OFFICE WITH THE APPROPRIATE FEE

I am the owner of property located on _____ Street.
Property number: 003-_____

I request a permit to make a sewer connection to the sewer line located on _____ Street,
to be approximately _____ feet from the
____ North ____ South ____ East ____ West side of building (check one), or

to be approximately _____ feet _____ North from the North property line
_____ South from the South property line
_____ East from the East property line
_____ West from the West property line

I will notify the sewer manager when work is about to commence and will adhere to the standards adopted by the Township.

Date Signature of Property Owner

SKETCH LOT, HIGHWAY AND POINT OF CONNECTION

FOR OFFICE USE ONLY

This application is hereby _____ Approved _____ Denied _____
Date Sewer Inspector

Received hook-up fee: \$ _____
Date Township Clerk

Progress: Start _____ Finish _____

FEE SCHEDULE

Permit fee: \$10.00

Total for hook-up and labor is: \$4,250.00 for non-gravity feed (SUBJECT OT CHANGE)

Total for hook-up of gravity feed is: \$1,000.00 (SUBJECT TO CHANGE)

FEEES SHALL BE PAID IN ADVANCE OF ANY WORK

EASEMENT AGREEMENT

INDENTURE made this _____ day of _____, 20_____,

Between _____
of _____

hereafter called **GRANTOR**, and **MACKINAC COUNTY**, organized under the laws of the State of Michigan, of Court House, 100 Marley Street, St. Ignace, Michigan 49781, hereafter called the **GRANTEE**.

WITNESSETH: Grantor, the receipt of which is hereby acknowledged, does by the presents grant, bargain, sell, release and warranty unto Grantee, its successors and assigns, an easement situated in the Township of Clark, Mackinac County, Michigan described as follows:

I. The Grantor's Legal Description: _____

II. The Easement: _____

The Grantor hereby grants permission to the County of Mackinac, the Grantee, to (1) enter upon the property described above for the purpose of constructing, operating, maintaining and replacing a municipal sanitary system, and to (2) enter upon property described above for the purpose of accessing the municipal sanitary system on adjacent properties. The location of the municipal sanitary system on the property described above shall be by mutual agreement between the Grantor and the Grantee.

IN WITNESS WHEREOF, the Grantor hereupon executes this easement by signature on the date above set forth.

State of Michigan
County of Mackinac

On _____, before me, a Notary Public in and for said County, appeared _____
_____, to me known to be the same person described herein and who acknowledged the within instrument, who acknowledged the same to be their free act and deed.

This agreement shall be binding upon the parties, their successors, assigns and personal representatives. Time is of the essence on all undertakings. This agreement shall be enforced under the laws of the State of Michigan.

This is the entire agreement.

Signed the day and year first written above.

Signed in the presence of:

Witness: _____ First Party: _____

Witness: _____ Second Party: _____