BUILDING PERMIT APPLICATION REVISED 01/2022 per BOC Resolution 21-160

HURON COUNTY PLANNING, BUILDING & ZONING DEPARTMENT 250 E. Huron Avenue, County Building, Room 102 BAD AXE, MICHIGAN 48413 (989) 269-9269 FAX (989) 269-3362

Date reviewed:
Permit #:
Permit Fee:
Method of Payment:
Receipt #

T	IORSITE	R,	OWNER	INFORMATION
1.	JUDSILE	œ	UVVINED	A INTUINIVIA I IUJIN

www.co.huron.mi.us/b	uilding_zoning.asp					
. JOBSITE & OWNER IN	NFORMATION			-		
Name of Owner/Agent:				operty I.D		
Job Location:	-t N-ma and Na	I-righistian (Townsh	:- Villaga ar City)	Spati	: No	
		Jurisdiction (Townsh			ion No.	D 1
Directions to site: Located on t	he N S E W (circle one) side	of the road between _	Cross Road	&C	ross Road	_Rds.
Owner's Mailing Address:	Street/Road Name and No.	Post Office	State Zip Code	Phone #	Cell#	
I. CONTRACTOR/HOMI	EOWNER INFORMATI	ON				
Contractor Homeowner Name		Phor	ne:	_Cell	_FAX	
Mailing Address:#	Street/Road Name	Post Of	fice (city, village, etc.)	State	Zip code	
Contractor Information:	State License # State R	Legistration #	Expiration Date	Fed I.D.#	MESC #	
A. Type of Improvement:	1New Construction (2Addition to existing 3Remodel or Repair (4Re-roofN 5Demolition. All mat Applica	building (Plans Requi change of use, wall or New Windows terial other than concre ant is responsible for	red) i.e, addition(s) to exist roof restructuring, fire dam New Siding ete must be removed from s	ting buildings, including att nage, interior wall changes, site. Utilities must be disco connection from utility co	ached garage. etc.) nnected from structure	e(s).
4Garage (residential) Atta	onal bedroom or bathroom ached. 5Garage (resi Exclusively for Farm Use-Submi 9Factory/Ind 1 13S-1 Auto R	n space: Yes idential) Detached. it AG Exempt Form);	No Number of new 6Other , i.e., storage Specify Use:	bedrooms:ge building (personal storage spitalAsse	e)	_

CONTINUE TO PAGE 2. SIGNATURE AND AFFIDAVIT REQUIRED ON PAGE 3.....

C. FOUNDATION SYSTEM (ch	eck appropriate foundation	on type and ATTACH FOO	ΓING AND FOUNDATION	WALL PLAN.) Page 2
1Crawl Space2. Ba	asement3.Permano	ent Wood Foundation (PW	(F)4. Other	
5Pole frame; Attach con	struction plans for buil-	ding.		
6. Piers; Attach plans for	location denth placem	ent of tie-downs for Man	ufactured Home	
			aractarea frome.	
7Slab on grade; Attach p	olans of building include	foundation design.		
8Manufactured home; for	undation per plans from 1	manufacturer. Attach for	ındation plans from r	nanufacturer.
D.TYPE OF FRAMING: 1	Wood; 2Mason	ry; 3Structural St	eel; 4Other: Sp	pecify:
E. MICHIGAN UNIFORM ENE comply with Part 10 (as amended)				
F. USE GROUP AND CONSTRUCT	TION TYPE:			
G. DIMENSIONS OF NEW CONS	STRUCTION: Constructi	on plans must be reviewed	l prior to issuance of bui	lding
permit. Number of Floors:	(include walkout basen	nent as a floor)		
F		T		
	length	width	area	wall height
Principal Building: Basement				
First Floor				
Second Floor				
Third Floor				
Fourth Floor				
Covered Porch: First Floor				
Second Floor				
Open Porch: First Floor				
Second Floor				
Wind Turbine: Overall Dimensions				
Height of Principal Building	g to ridge:	Commercial V	Wind Turbine Hub Height (fi	t) :
	length	width	area	wall height
Garage or Shed: First Floor				
Second Floor				
2 nd Garage or shed: First Floor				
Second Floor				
Height of Accessory Buildin	g to ridge:			
H. ESTIMATED TOTAL COST OF IMPRO	DVEMENTS:			
		CONTINUE TO PAGE 3		

IV. OTHER INFORMATION & APPROVALS – Applicant must	provide documents of other approvals. Page 3
THE FOLLOWING MUST BE REVIEWED TO ISSUE BUILDING PERMIT	PROVIDE SIGNATURE OF REVIEW & ATTACH DOCUMENTS.
A. ZONING APPROVAL: Required for all new construction and change of use projects. Provide site plan & required information on page 4 of this application. County zoned townships: Bingham, Bloomfield, Brookfield, Dwight, Fairhaven, Gore, Grant, Hume, Lincoln, McKinley, Rubicon, Sebewaing, Sheridan, Sherman, Sigel, and Winsor.	Site Permit No(Attached zoning approval.) Reviewed by:
All other townships, village & cities with separate zoning: Attached site plan and zoning approval.	icenewa sy.
B. HEALTH DEPT. APPROVAL: Septic system & well approval required for new construction where municipal services are not available. Health Dept. must approve added bedroom space for existing homes with septic systems. Health Department shall review food service establishments prior to issuance of building permits.	Septic Permit No Well Permit No
C. SOIL EROSION REVIEW: Review location of site. For sites where disturbed area will exceed one (1) acre and for all sites within 500 feet of the water (lake, stream, county drain), a soil erosion permit is required.	Soil Erosion Permit No
D. FLOOD ZONE REVIEW: Review location of site relative to Flood Zone Maps. All sites located in "ZONE A" shall have site and foundation elevation information attached. Flood Maps are available in Building & Zoning Office issued by Federal Emergency Management Agency (FEMA) on December 2, 2008.	Check all sites located in Flood Zones. Where property is located on river or stream, refer applicant to DEQ's Joy Brooks at 989-686-8025 Ext. 8364
E. HIGH-RISK EROSION AREAS: Caseville Twp., Lake Twp., Port Austin Village, Port Austin Township. DEQ Permit is required for sites classified as "High-Risk Erosion Areas". See Map Files.	Refer applicant to Penny Holt, DEQ Lansing, MI (517) 373-1952
F. ENVIRONMENTAL AREAS: Caseville Twp., Fairhaven Twp., McKinley Twp., Rubicon Twp., Sebewaing Village and Sebewaing Township. See Map Files.	No construction in Environmental Areas. Refer applicant to DEQ's Martin Jannereth 517-335-3458.
G. LAND DIVISION APPROVAL: For new parcels (without separate property I.D. number, land division approval is required prior to issuance of building permit.	Applicant is to contact their municipal assessor for land division approval. Refer applicants to Tax Mapping for property identification numbers.
*Building Department must receive all required information above BEFORE a	ccepting a building permit application. Incomplete applications will be returned.
construction a new home, addition, garage, remodeling/re-roofing, etc., a homeow significantly involved. If you, the homeowner, choose to act as your own gener you, the homeowner, assume the liability and responsibility that the licensed control Building & Zoning Department (County of Huron) will not be responsible for an work under the permit you obtained. Contractors performing work under your plicensed in their trade by the State of Michigan. Homeowners should request evid the homeowner's responsibility to have a complete understanding of the current correction of any code violation, even if the contractor did the work under the perion the job, whether it is to a builder's or subcontractor's employee. In the even unable to complete the work, the homeowner will be legally responsible for complete. V. APPLICANT SIGNATURE AND AFFIDAVIT OF UNDERS'	TANDING: I hereby certify that I am the owner of record of this property or that
the proposed work is authorized by the owner of record and that I have been authagree to conform to all applicable laws of the State of Michigan. All information su	norized by the owner to make this application as his/her authorized agent, and we abmitted on or with this application is accurate to the best of my knowledge. Section prohibits a person from conspiring to circumvent the licensing requirements of this
Applicant name (printed):	
Applicant signature:	Date:
VI. Building Department Validation - Permit cannot be issue	d without site visit and required signatures.
Building Permit Fee:Signature of Building Insp	
Zoning Fee:	Date:
Flood Zone Fee: Site Visit by:_ Plan Review Fee:	Date
	Director:Date

CONTINUE TO PAGE 4

ZONING COMPLIANCE PERMIT & SITE PLAN FOR COUNTY ZONED TOWNSHIPS

PAGE 4

Huron County Planning, Building & Zoning Department 250 E. Huron Ave., County Building, Room 102 Bad Axe, MI 48413 (989) 269-9269 FAX (989) 269-3362

Provide a drawing below, or attach as a separate page, a Site Plan of your proposed project. The drawing must show all existing buildings on your property as well as the location and dimensions of the proposed construction. Indicate the distance new construction will be from all property lines, including the distance from the actual right-of-way line. Where applicable, the location of the septic system and well must be shown. The County Zoning/Site Permit is \$75.00; other fees may apply.

ame of Owner/Agent:	Property I.D				Parcel Size		
Job Location: Road/Street Name and No. Located on the: N S E W (circle one) side of the road between		Jurisdiction (Township, Village or City)			Section	Section No.	
		en	& Cross Road		Cr	Rds. oss Road	
wner's Mailing Address:	g	D 0.07		7. 0.1	DI //	G N "	
	Street/Road Name and No.	Post Office	State	Zip Code	Phone #	Cell #	
	Disclaimer: P	Indicate N roperty Owner is resp	orth Directi	on determining proper	ty lines.		
oning District & Descriptio	on of project:						
etbacks: Front:	Side	Side		Rear		_	
oning Official Signature:	Permit not valid with	out authorized sign:	ature	Date:		-	
	Permit not valid with	CONTINUE TO PAC	ature GE 5 (IF AP	PLICABLE)			

Please Answer The Following Questions for NEW Residential Stick Built Homes & NEW Manufactured/Modular Homes Only Note: Information is provided to U.S. Census Bureau

Number of bedrooms:					
Number of baths: Full Half					
Fireplace: Yes No					
Laundry room: Yes No What Floor:					
Type of heat:(propane gas, natural gas, geothermal, boiler, etc.)					
Air conditioning: Yes No					
Primary house covering: (brick, vinyl, stone)					
Secondary house covering:					
If the house is 2 stories, is the foyer open to the 2 nd floor: Yes No					
Plumbing Water System: Private Well or Public (Municipal) Supply					
Plumbing Sewer System: Private Septic or Public (Municipal) Sewer					