

BERGLAND TOWNSHIP
P.O. BOX 91
101 PINE ST
BERGLAND, MI. 49910

BUILDING PERMIT APPLICATION FOR
NEW HOMES – ADDITIONS – COMMERCIAL & INDUSTRIAL BUILDINGS



BERGLAND TOWNSHIP

Phone: 906-575-3522

Building Inspector: (No normal hours, please call before)

Roman Tauer

Home phone 906-932-2226 or 906-364-9645

Electrical, Plumbing, Mechanical: State Of Michigan

Phone 517-241-9302

Zoning Administrator: No Normal office hours

Tom Paulman: 906-575-9060

Health Department: (800) 222-1222 or (906) 884-4485

Bergland Township has developed this application packet to assist you in your building needs. Our Building Inspector does not hold regular office hours and will accept phone calls at home.

All information requested needs to be turned in. Incomplete information will only delay your permit process.

When necessary, well and septic permits are required and zoning approval before a building permit will be issued.

We hope that you have all information necessary to start your project. Each form is self-explanatory, but if you have questions please contact us.

PERMITS FOR ELECTRICAL, PLUMBING AND MECHANICAL
MUST BE APPLIED FOR THROUGH THE STATE OF MICHIGAN

Building Permit Application

Bergland Township
Building Division
P.O. Box 91
Bergland, MI. 49910
Phone: 906-787-2463

Authority: 1972 PA 230	Property ID No. _____ - _____ - _____ - _____
Penalty: Failure to provide the information may result in denial of your request.	

Project or Facility Information			
PROJECT NAME		ADDRESS	
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED		CITY	ZIP CODE
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township		OF:	
COUNTY	BETWEEN	AND	

Applicant				
NAME		E-MAIL		
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)

Owner or Lessee				
NAME		ADDRESS		
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)	

Signature

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, 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 subjected to civil fines.

SIGNATURE OF OWNER (Required)	TYPE OR PRINT
SIGNATURE OF OWNER'S AGENT	TYPE OR PRINT

BUILDING PERMIT FEE ENCLOSED

Validation - For Department Use Only **VALIDATION AREA**

USE GROUP _____
TYPE OF CONSTRUCTION _____
SQUARE FEET _____
CERTIFICATE OF OCCUPANCY <input type="checkbox"/> YES <input type="checkbox"/> NO
TOTAL PERMIT FEE \$ _____
APPROVAL SIGNATURE _____

Architect or Engineer

NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
LICENSE NUMBER			EXPIRATION DATE

Contractor

NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
BUILDERS LICENSE NUMBER			EXPIRATION DATE
FEDERAL EMPLOYER ID NUMBER (or reason for exemption)		WORKERS COMP INSURANCE CARRIER (or reason for exemption)	
UNEMPLOYMENT INSURANCE AGENCY EMPLOYER ACCOUNT NUMBER (or reason for exemption)			

Type of Job

A. Type of Improvement

NEW BUILDING
 ALTERATION
 DEMOLITION
 FOUNDATION ONLY
 RELOCATION
 ADDITION
 REPAIR
 MOBILE HOME SET-UP
 PREMANUFACTURE
 SPECIAL INSPECTION

B. Plan Review Required

A set of construction documents are required with each application for a permit, unless waived by the building official when code compliance can be determined based on the description in the application.

Construction documents must be sealed and signed by an architect or professional engineer in accordance with 1980, PA 299 as amended. The seal and signature is not required for one and two family dwellings less than 3,500 square feet of calculated floor area and public works less than \$15,000 in total construction cost.

For buildings regulated by the Michigan Building Code, a set of construction documents must be submitted with a separate Application for Plan Examination, the appropriate fee, and approved before a building permit can be issued.

Plan Review Information

A. Residential - Buildings Regulated by the Michigan Residential Code

<input type="checkbox"/> ONE FAMILY	<input type="checkbox"/> TOWNHOUSE NO. OF UNITS _____	<input type="checkbox"/> DETACHED GARAGE
<input type="checkbox"/> TWO OR MORE FAMILY NO. OF UNITS _____	<input type="checkbox"/> ATTACHED GARAGE	<input type="checkbox"/> OTHER _____

B. Buildings Regulated by the Michigan Building Code

- | | | |
|---|---|---|
| <input type="checkbox"/> (A-1) ASSEMBLY (THEATRES, ETC.) | <input type="checkbox"/> (H-1) HIGH HAZARD (DETONATION) | <input type="checkbox"/> (M) MERCANTILE |
| <input type="checkbox"/> (A-2) ASSEMBLY (RESTAURANTS, BARS, ETC.) | <input type="checkbox"/> (H-2) HIGH HAZARD (DEFLAGRATION) | <input type="checkbox"/> (R-1) RESIDENTIAL 1 (HOTELS, MOTELS) |
| <input type="checkbox"/> (A-3) ASSEMBLY (CHURCHES, LIBRARIES, ETC.) | <input type="checkbox"/> (H-3) HIGH HAZARD (COMBUSTION) | <input type="checkbox"/> (R-2) RESIDENTIAL 2 (MULTIPLE FAMILY) |
| <input type="checkbox"/> (A-4) ASSEMBLY (INDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-4) HIGH HAZARD (HEALTH HAZARD) | <input type="checkbox"/> (R-3) RESIDENTIAL 3 (CHILD & ADULT CARE) |
| <input type="checkbox"/> (A-5) ASSEMBLY (OUTDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-5) HIGH HAZARD (HPM) | <input type="checkbox"/> (R-4) RESIDENTIAL 4 (ASSISTED LIVING) |
| <input type="checkbox"/> (B) BUSINESS | <input type="checkbox"/> (I-1) INSTITUTIONAL 1 (SUPERVISED) | <input type="checkbox"/> (S-1) STORAGE 1 (MODERATE HAZARD) |
| <input type="checkbox"/> (E) EDUCATION | <input type="checkbox"/> (I-2) INSTITUTIONAL 2 (HOSPITALS ETC.) | <input type="checkbox"/> (S-2) STORAGE 2 (LOW HAZARD) |
| <input type="checkbox"/> (F-1) FACTORY (MODERATE HAZARD) | <input type="checkbox"/> (I-3) INSTITUTIONAL 3 (PRISONS ETC.) | <input type="checkbox"/> (U) UTILITY (MISCELLANEOUS) |
| <input type="checkbox"/> (F-2) FACTORY (LOW HAZARD) | <input type="checkbox"/> (I-4) INSTITUTIONAL 4 (DAY CARE ETC.) | |

Alteration, repairs and additions - Provide a description of the work to be covered by the building permit. As examples; 20,000 square foot school roof covering, building a 2,300 square foot school addition, replace 5 exterior doors, renovate basement in a residence, etc.

Building Data

A. Type of Mechanical

WILL THERE BE FIRE SUPPRESSION? YES NO

B. Type of Construction

- | | | |
|---|---|---|
| <input type="checkbox"/> 1A - Non Combustible (Protected Structural Elements) 3HR | <input type="checkbox"/> 1B - Non Combustible (Rated Structural Elements) 2HR | <input type="checkbox"/> 2A - Non Combustible (Rated Structural Elements) 1HR |
| <input type="checkbox"/> 2B - Non Combustible (Non Rated Structural Elements) | <input type="checkbox"/> 3A - Non Combustibles (Exterior Walls Only) | <input type="checkbox"/> 3B - Non Combustible (Bearing Walls Rated) |
| <input type="checkbox"/> 4 - Heavy Timber | <input type="checkbox"/> 5A - Combustible (Structural Elements Rated) 1HR | <input type="checkbox"/> 5B - Combustible (All Elements Not Rated) |

C. Dimensions / Data

FLOOR AREA:	EXISTING	ALTERATIONS	NEW
BASEMENT	_____	_____	_____
1ST & 2ND FLOOR	_____	_____	_____
3RD - 10TH FLOOR	_____	_____	_____
11TH - ABOVE	_____	_____	_____
TOTAL AREA	_____	_____	_____

D. Number of Off Street Parking Spaces

ENCLOSED _____ OUTDOORS _____

BERGLAND TOWNSHIP

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 - Sewer	<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				

IX. Site or Plot Plan - For Applicant Use

A large grid of graph paper, consisting of 30 columns and 40 rows of small squares, intended for drawing a site or plot plan.

Expiration of Permit: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 365 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 365 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT**

ONTONAGON COUNTY
SOIL EROSION AND SEDIMENTATION
POLLUTION CONTROL APPLICATION
PART 91 OF ACT 451 OF 1994

APPLICANT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

LOCATION: SECTION _____ TOWN _____ RANGE _____ TOWNSHIP _____

CITY _____ COUNTY _____ STREET ADDRESS _____

PROPOSED EARTH CHANGES _____

SIZE OF CHANGE _____

DISTANCE TO NEAREST WATER _____

PROJECT START DATE _____ COMPLETION DATE _____

COST OF EROSION CONTROL _____

NAME AND ADDRESS _____

OF PLAN PREPARER _____

NAME AND ADDRESS _____

OF RESPONSIBLE PARTIES _____

FOR THE EARTH CHANGE _____

PERFORMANCE DEPOSIT _____

I (WE) AFFIRM THAT THE ABOVE INFORMATION IS CORRECT AND I (WE) WILL CONDUCT THE ABOVE EARTH CHANGE IN ACCORDANCE WITH PART 91 OF ACT 451 OF 1994, STATE OF MICHIGAN AS AMENDED, ITS RULES AND ORDINANCES.

OWNERS SIGNATURE _____ DATE _____

ADDRESS _____

SEND COMPLETED APPLICATION TO: DWAYNE KOLPACK - Phone (906) 884-4980
ONTONAGON COUNTY COURTHOUSE
725 GREENLAND ROAD
ONTONAGON, MI. 49953

NOTE: A COMPLETE SET OF EARTH CHANGE PLANS MUST BE ATTACHED TO THIS APPLICATION WHEN RETURNED.

ONTONAGON COUNTY
SOIL EROSION AND SEDIMENTATION CONTROL AGENCY
PERMIT FEE SCHEDULE

ONE AND TWO FAMILY DWELLINGS

Up to one acre- plan review and permit fee	\$100 (includes 1 inspection)
Each additional acre or fraction thereof	\$10
Additional inspections	\$30 per inspection

COMMERCIAL & INDUSTRIAL, UTILITIES, AND TRANSPORTATION FACILITY

Up to one acre- plan review and permit fee	\$200 (includes 1 inspection)
Each additional acre or fraction thereof	\$20
Additional inspections	\$30 each

WATER IMPOUNDMENTS (PONDS & DAMS)

Up to one acre- plan review and permit fee	\$100 (includes 1 inspection)
Each additional acre or fraction thereof	\$10
Additional inspections	\$30 each

BERGLAND TOWNSHIP

101 PINE ST.
P.O. BOX 91
BERGLAND MI. 49910

BUILDING PERMIT REQUIREMENTS

1. COMPLETED APPLICATION, INCLUDING SITE PLAN
2. FLOOR PLAN, FRONT AND SIDE VIEW OF BUILDING, INCLUDING MEASUREMENTS.
3. COPY OF STATE WELL AND SEPTIC PERMITS IF NEEDED
4. SPECIFICATION SHEET COMPLETED
5. CONTRACTOR INFORMATION OR AFFIDAVIT COMPLETED
6. COPY OF PROPERTY TAX STATEMENT OR LEGAL DESCRIPTION OF PROPERTY

FIVE INSPECTIONS ARE REQUIRED

1. FOOTING, BEFORE CONCRETE IS POURED
2. FOUNDATION, PRIOR TO BACKFILLING
3. ROUGH IN, BEFORE INSULATION IS INSTALLED
4. INSULATION, PRIOR TO COVERING UP ALL INSULATION
5. FINAL, PRIOR TO BUILDING BEING OCCUPIED

NOTICE: A CERTIFICATE OF OCCUPANCY IS REQUIRED BEFORE IT CAN BE OCCUPIED

BUILDING INSPECTOR MUST BE GIVEN 48 HOUR NOTICE FOR ALL REQUIRED BUILDING INSPECTIONS!!!

This application must be approved by the building official, fee paid and permit issued before any construction can commence.

BUILDING INSPECTOR: ROMAN TAUER
PHONE: 906-932-2226 OR 906-364-9645
LEAVE MESSAGE ON MACHINE IF NO ANSWER

