

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
ONTONAGON COUNTY COURTHOUSE
725 GREENLAND ROAD
ONTONAGON, MI. 49953
(Phone) 906-884-4980

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

BUILDING PERMIT APPLICATION FOR
DECKS - DOCKS - GARAGES - PATIO'S - ROOFING - STORAGE 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.

BERGLAND TOWNSHIP BUILDING INSPECTION NOTIFICATION

Roman Tauer - Inspector
906-932-2226

A. 24 hour prior notice must be given to the Building Inspector for Inspections.

- 1. First Inspection - Prior to installation of concrete for footings or slab.
- 2. Second Inspection - Prior to insulating or covering up framing material (Rough-In)
- 3. Third Inspection - Prior to covering with sheetrock or paneling. (For home or buildings requiring insulation and interior vapor bearing).
- 4. Fourth Inspection - Upon completion of all work before occupancy.

B. You must submit a full listing of all materials used for this project with the application for permit. Lumber dimensions ETC will be given for their applications eg. Joist, rafters, headers, wall etc.

C. Ice and water shield must be used on any roof that is on a heated building. It must extend inside the exterior wall a minimum of 2 feet on a horizontal line.

D. All frost footings must extend a minimum of 42 inches below top of grade.

I, _____, have read the above information and understand what is required and when to call for inspections.

_____,
Signature of Applicant

_____,
Date Signed

BERGLAND TOWNSHIP

Name of Property Owner

Address

Name of person applying for permit

Phone number

_____-_____-_____-_____
Parcel Code Number

Date of Completion: _____ Estimated Cost of Project: _____

Comments:

DECK	CONCRETE PATIO	DOCK
Size _____ x _____ Wood or Other _____	Size _____ x _____	Size _____ x _____

Roofing (Circle all that apply) Hip Gable Gambrel Overhang Asphalt Shingles Rolled Roofing Metal Other _____	Garage Storage Building (Circle One) Size _____ x _____ Foundation _____ Floor _____ Walls _____ Doors _____ Interior Finish _____ Electricity _____
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I am familiar with the various state and local building, health and zoning codes and I agree to conform to said codes.

Signed _____, Date _____,

BUILDING SPECIFICATIONS

- 1. FOOTING WIDTH _____ DEPTH _____ RODDED _____ ?
- 2. FOUNDATION WALL MATERIAL _____
- 3. NUMBER OF CRAWL SPACE VENTS _____ SIZE _____
- 4. NUMBER OF BASEMENT WINDOWS _____ SIZE _____
- 5. FLOOR JOISTS _____ X _____ 'S _____ OC. _____ SPAN
- 6. TYPE OF BEAM _____ SIZE _____
- 7. SUBFLOOR MATERIAL _____ FLOORING _____
- 8. STUD SIZE _____ X _____ 'S _____ ON CENTER
- 9. EXTERIOR SHEATHING _____ SIDING _____
- 10. INTERIOR WALL & CEILING MATERIAL _____
- 11. HEIGHT OF BEDROOM WINDOWS FROM FLOOR TO OPENING _____
- 12. CEILING JOIST SIZE _____ X _____ 'S _____ OC _____ SPAN
- 13. RAFTER SIZE _____ X _____ 'S _____ OC _____ SPAN
- 14. ROOF PITCH _____ SHEATHING _____ COVERING _____
- 15. INSULATION THICKNESS _____ ROOF _____ WALLS
- 16. SMOKE DETECTORS (REQUIRED FOR HOME) _____
- 17. INCLUDE FLOOR PLAN WITH DEMENSIONS AND DRAWINGS OF STRUCTURE
- 18. ADDITIONAL COMMENTS. _____

- 20 .PROJECT DESCRIPTION: (Describe your project in detail using sizes where needed)

This form is to be completed and returned with your permit application if you are doing the work yourself.

Home Owner Affidavit (Circle One)

New Building

Existing Building

Location _____ Date _____

As the bona fide owner of the above listed property, which is a single-family residence and which is, or will be on completion my place of residence. I hereby make application of an owners permit to install or erect. (Building Type) _____

I certify that I am familiar with the provisions of the applicable ordinances and rules and hereby agree to make this installation or construction in conformance with the ordinance. In making this application, I realize I am assuming the responsibility of a licensed contractor for the work listed in this permit application and will do the actual work involved myself. I agree to notify the Building Department within (72) hours after the work is completed so that the department may make its required inspection. I further agree to keep all parts of this work exposed until accepted by the inspector.

IMPORTANT, a separate permit shall be obtained for each of the various trades, such as building, electrical, plumbing and mechanical. Violations Penalties. Any person who shall violate any provision of the Ordinance or shall fail to comply with any of the requirements thereof, shall, upon conviction thereof, be punished by State of Michigan Building Act.

Signature of Owner

This form is to be completed and returned with your permit application if you are not doing the work yourself.

The following information is required by Act 135, Public Acts of 1989 for all permit applications for work on residential buildings or structures.

Builders License Number

Expiration Date

Federal Employer ID Number

Builders Signature

Date

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

