BUILDING PERMIT APPLICATION - POLE BARN -

ARGENTINE TOWNSHIP 9048 SILVER LAKE ROAD LINDEN MI 48451 FIRE DEPT. OFFICE (810) 735-4911

| Estimated Value of Structure \$ | | | | | Parcel ID: 01- | | | |
|--|--------------------|--------------|----------|------------|------------------|---------|--------------------|--|
| LOCATION OF BUILDING | S | | | | | | | |
| Address: | | | | | | | | |
| City: | | | State: | | | | Zip: | |
| OWNER INFORMATION | | | | | | | | |
| | | | | | | | | |
| Name: | | | | | | | | |
| Address: | | | 1 | | Phone: | () | T | |
| City: | | | State | | | | Zip: | |
| ARCHITECT OR ENGINEER | (if ar | oplicable) | | | | | | |
| Name: | \ 1 | , | | | | | | |
| Address: | | | | | Phone: | () | | |
| City: | | | State: | | | , | Zip: | |
| License No.: | | | | | Expiratio | n Date: | F - | |
| License No.: Expiration Date: CONTRACTOR INFORMATION | | | | | | | | |
| | | I.N | | | | | | |
| Name: | | | | | | | | |
| Address: | | T | | | Phone: | () | | |
| City: | | State: | | | | Zip: | | |
| License No: | | | | | Expiration Date: | | | |
| Federal Employer ID or Reason for Exemption: | | | | | | | | |
| Workers Comp. Insurance Carrier or Reason for Exemption: | | | | | | | | |
| MESC Employer Number or Reas | | | <i>,</i> | | | | | |
| | | Exemption: | | | | | | |
| TYPE OF IMPROVEMENT | | | | | | | | |
| Residential: New Building | Addit | tion | A | ltara | tion | | Repair | |
| Commercial: | Addition | | | Alteration | | | Керап | |
| New Building Addition | | | A | Alteration | | | Repair | |
| Accessory Building: | | | | | | | | |
| Garage, Attached | Gara | ge, Detached | P | ole B | arn | | Shed (over 200 sf) | |
| Misc: | | | | | | | | |
| Foundation Only | | | | | Home Set-up | | | |
| Deck | Swimming Pool Othe | | | ther | er – explain | | | |

| Masonry, Wall Bearing Wood Frame Structured Steel Reinforced Concrete |
|--|
| Sanitary Sewer Septic System |
| Sanitary Sewer Septic System |
| UILDING DIMENSIONS – NEW BUILDING(S) of Stories 1st Floor Area = square feet |
| of Stories 1st Floor Area = square feet |
| of Stories 1st Floor Area = square feet |
| of Stories 1st Floor Area = square feet 2nd Floor Area= square feet otal Area of Addition= square feet Garage Area being added= square feet |
| of Stories 1st Floor Area =square feet |
| otal Area of Addition=square feet |
| APPLICANT INFORMATION (if not Owner) ame: ddress: Phone: () State Zip: hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the omake this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigal information submitted on this application is accurate to the best of my knowledge. ection 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523 are Michigan Complied Laws, prohibits a person from conspiring to circumvent the licensing requirements of this State lating to persons who are to perform work on residential buildings or a residential structure. Violators of Section 23a are subject to civil fines. |
| ddress: Description: Descrip |
| ame: ddress: Phone: () ity: State Zip: hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the omake this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michig II information submitted on this application is accurate to the best of my knowledge. ection 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.152; he Michigan Complied Laws, prohibits a person from conspiring to circumvent the licensing requirements of this State action to persons who are to perform work on residential buildings or a residential structure. Violators of Section 23a are subject to civil fines. |
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| ignature of Applicant or Owner: Date: |
| |
| ARGENTINE TOWNSHIP OFFICE USE ONLY – DO NOT NOT WRITE BELOW THIS LINE |
| pproved Signature: |
| ot Approved Title: |
| |
| |
| Date: |
| ARGENTINE TOWNSHIP OFFICE USE ONLY – DO NOT NOT WRITE BELOW THIS LINE |

| Site Plan | |
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| Indicate direction of North within the circle | |
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