P2 - BUILDING PERMIT APPLICATION

		Date:					
PROPERTY INFORMATI	ION						
Address:		Floor:	Suite#:	Stories:			
AKA:							
Parcel ID#(s):							
Current Legal Use of Property							
Are there any existing buildir	ngs or structures on this parc	el?	Yes] No			
PROJECT INFORMATIC)N						
Permit Type: New	Alteration Addition	on \square D	emolition	Correct Violation			
	nange of Use Tempor						
Revision to Original Perm		_					
Description of Work (Descri							
	, ,						
		MBC use c	hange 🗌 No	MBC use change			
Included Improvements	Check all applicable; these trade a	reas require	separate permit ap	plications)			
HVAC/Mechanical	Electrical Plumbing	Fire	Sprinkler Systen	n 🔲 Fire Aları			
Structure Type							
New Building Exist	ing Structure Tenant S	Space [Garage/Acce	essory Building			
Other:S	iize of Structure to be Demo	lished (LxV	VxH)	cubic ft			
Construction involves change	es to the floor plan?	Yes	☐ No				
(e.g. interior demolition or constru	ction to new walls)						
Use Group:			Code Table 601)_				
Estimated Cost of Construc	etion \$	-	\$	Department			
Structure Use	Бу соппасто		Бу	Department			
Residential-Number of Units: _							
Commercial-Gross Floor Area:				ss Floor Area			
Proposed No. of Employees:							
PLOT PLAN SHALL BE submitt (must be correct and in detail)	•						
existing and proposed distance				_			
	For Building Departme	nt Use On	ly				
ntake By:	Date:	Fee	es Due:	DngBld? No			
Permit Description:							
Current Legal Land Use:	_	Proposed Use:					
Permit#:	Date Permit Issued:		Permit Cost: \$				
Zoning District:	Zonir	ng Grant(s)	:				
Lots Combined?	es No (attach zon	ing clearance	e)				
Revised Cost (revised permit ag	oplications only) Old \$		New \$				
Structural:	Date:	N	otes:				
Zoning:		N	lotes:				
Other:	Date:	Ν	lotes:				

P2 - BUILDING PERMIT

Property Owner/Hon	neowner	Property Owne	er/Homeowne	er is Permit	Applicant
Name:		Compa	any Name:		
Address:				_ State:	Zip:
Phone:		Mobile	:		
Driver's License #:					
Contractor (
Representative Name:		Com	pany Name: _		
Address:		City:		_ State:	Zip:
Phone:	Mobile:		Email:		
City of Detroit License	#:				
TENANT OR BUSI	NESS OCCUPAN	IT Tena	ant is Permit Ap	oplicant	
Name:	Phone:		Email:		
ARCHITECT/ENGI	NEED/CONSULT	ANT Arc	·hitect/Enginee	er/Consultant	t is Permit Applican
					
Name: Address:					
Phone:	Wiobile:		EIIIaII		
inspections related to to the person, firm or confirm or confirm Name: Subscribed and sworn to Signature:	orporation any portion (Homeowner) b before me this	on of the work consideration of the work consideration of	overed by this 	s building p	ermit. _ Date: County, Michiga
Signature:	(Notary Public)		_ iviy commis	JIOIT EXPITE.	<u> </u>
	PERMIT A	APPLICANT SI	GNATURE		
I hereby certify that the restrictions that may appearing that the proposito make this applicationall applicable laws and inspections are requesthe previous inspections.	oply to this construct ed work is authorized on as the property ow ordinances of jurisd sted and conducted	tion and am aw d by the owner vner(s) authoriz liction. I am aw d within 180 d	rare of my resp of the record ed agent. Fur rare that a pe ays of the da	oonsibility t and I have ther I agree r mit will e x	hereunder. I been authorized to conform to kpire when no
Print Name:(Pe		Signature:			_ Date:
Driver's License #: Subscribed and sworn to		Expi	ration:		
Signature:	(Notary Public)	My Com	mission Expire	es:	
Section 23a prohibits a state rela	of the state constru person from consp ting to persons who dential structure. V	uction code ac iring to circum o are to perfo	t of 1972, 19 nvent the lice rm work on a	72PA230, nsing requ residentia	MCL 125.1523A, irements of this I building or a

This application can also be completed online. Visit detroitmi.gov/bseed/elaps for more information.

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