

MAINTENANCE PERMIT CHECKLIST -- (Return with Application)

Project address/location of proposed work: _____

Owner's Name: _____

Contractor's Name: _____

Before a permit may be issued, all of the following documentation must be submitted or justified as non-applicable. Please indicate by checkmark that each item has been enclosed with the application.

- _____ 1. **LOT DIAGRAM** on back of first page of application.
Is the structure within the property boundaries? _____ YES _____ NO

- _____ 2. **PROOF OF OWNERSHIP** (Provide a copy of one of the following documents: tax statement, assessment notice, deed, title insurance commitment...) **RECORDED DEED OR RECORDED LAND CONTRACT WILL BE REQUIRED FOR ALL NEW HOME CONSTRUCTION WHETHER STICK BUILT OR PRE-MANUFACTURED. THE RECORDING DATE OF THIS DEED MUST BE PRIOR TO 4/1/97.**

- _____ 3. **PROPERTY TAX I.D. NUMBER**

- _____ 4. **DESCRIPTION OF MAINTENANCE WORK PROPOSED:**

- _____ 5. **OTHER PERMITS EVENTUALLY NECESSARY:**
____ Electrical ____ Mechanical ____ Plumbing
The applicant or a licensed contractor must submit separate application forms for these permits prior to commencing work on that portion of the project.

RESPONSIBILITIES OF APPLICANTS

It is the legal responsibility of the applicant to call for all required inspections or before any electrical, plumbing, mechanical, or structural work is concealed or covered. It is also the applicant's responsibility to obtain and submit separate applications for any electrical, mechanical, plumbing or building permits.

BUILDING DEPARTMENT (Associated Government Services, Inc.) OFFICE HOURS are 8:00 am to 12:00 and 1:30pm to 4:30pm, Monday through Friday. The HOME OFFICE may be contacted by PHONE at 269-629-0600 or 1-800-627-2801 (an answering system operates 24 hours a day to obtain information, forms, and inspections); by MAIL at 8721 Gull Road, Suite B, Richland, MI, 49083; or by FAX at 269-629-0601.

Signed: _____ Date: _____

PLEASE CALL SHOULD YOU REQUIRE FURTHER ASSISTANCE IN COMPLETING APPLICATIONS.

MAINTENANCE PERMIT

AGS Building Dept
8721 Gull Rd. Suite B
Richland, MI 49083
(269) 629-0600
(800) 627-2801
Fax (269) 629-0601

Date: ____ / ____ / ____

Jurisdiction of _____

Permit # _____

New residential construction, addition, and alteration

Job Address: _____ Property Tax I.D.: _____
Zoning district: _____ Permit Determinant: _____
Use Group: _____ Owner: _____ () _____ phone
Type Const.: _____ Address: _____ () _____ phone
Basic Dimensions: _____ ft. x _____ ft., Contractor: _____
No. Floors: _____ Address: _____

- | | | |
|---|---------------------------|----------------------------------|
| _____ Sq. ft. main floor | _____ No. rooms 2nd floor | _____ No. wood burners |
| _____ Sq. ft. second floor | _____ No. full baths | _____ Sq. ft. porches/breezeways |
| _____ Sq. ft. fin. basement | _____ No. half baths | _____ Sq. ft. wood deck |
| _____ Sq. ft. unfin. bsmt. | _____ No. fireplaces | _____ (ft.) ceiling height |
| _____ No. rooms 1st floor | _____ No. chimneys | _____ (ft.) building height |
| _____ Sq. ft. garage (attached garage requires fire separation) | | |

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

FOUNDATIONS (11)

- _____ fgs. _____ " x _____ "
- _____ " below fin. grade
- _____ No. post footings
- _____ " x _____ " x _____ "
- _____ Poured walls
- _____ H.C. block _____ "
- _____ Wood foundation
(provide diagram)
- _____ Ft. Foundation wall height
- _____ " crawl space wall height
- _____ " egress sill height
- _____ No. bsmt. windows
- _____ Crawl space vent openings

ROUGH-IN FRAMING (10)

- _____ Sill plate (treat.)
- _____ Wall plates
- _____ headers
- _____ wood girder
- _____ steel girder
- _____ post _____ ft. O.C.
- _____ stud wall
- _____ masonry
- _____ fl. joists _____ " O.C.
- _____ Ceil. jsts _____ " O.C.
- _____ Rafters _____ " O.C.
- _____ Truss (diagram required)
- _____ " floor sheathing
- _____ " wall sheathing
- _____ " roof sheathing
- _____ " corner brace sheath

EXTERIOR (3)

- _____ Wood
- _____ Aluminum/Vinyl
- _____ Brick
- _____ Block

ROOFS (4)

- _____ Hip
- _____ Gable
- _____ Front overhang
- _____ Other overhang
- _____ Eavestrough

CHIMNEY TYPE

- _____ Brick
- _____ Block
- _____ Stone
- _____ Metal
- _____ Asphalt Shingles
- _____ Underlayment
- _____ Vents
- _____ Other Coverings

WINDOWS (5)

- _____ No. of windows
- _____ Wood sash
- _____ Metal sash
- _____ Type
- _____ egress/bedrms
- _____ attic access 22" x 30"

INSULATION (9)

- _____ " Fiberglass
- _____ " Cellulose
- _____ " Blown in fb. glass
- _____ " Foam
- _____ other
- _____ " rigid poly ure.
- _____ " rigid styro
- _____ " insul sheath
- _____ wind barrier
- _____ (mil) moisture barr.

INTERIOR (13)

- _____ Foyer
- _____ Kit fl.
- _____ Other fl.
- _____ drywall
- _____ plaster
- _____ covered ceiling
- _____ pnl. wainscot
- _____ 5/8" garage fire code
- _____ BUILT-IN ITEMS (15)
- _____ oven _____ range
- _____ disposal
- _____ hood/fan
- _____ dishwasher
- _____ refrigerator
- _____ incinerator
- _____ vanities
- _____ ' cupboard length

Contractor Will Stake 2 Adjacent Lot Lines for First Inspection. Sketch Lot Diagram On Back.

Permits eventually required for this project:

Electrical Permit
 yes no

Plumbing Permit
 yes no

Mechanical Permit
 yes no

COST OF PERMIT \$ _____

Building Dept.

By: _____

Make checks payable to:

LOT DIAGRAM

Owner: _____

Project Address: _____

Property Tax #: _____

- | | |
|-------------------------------|---|
| 1) Draw lot lines in feet | 5) Show dimensions of all buildings |
| 2) Label street | 6) Show distance from all sides of buildings to all lot lines |
| 3) Draw existing structures | 7) Draw lakes, streams, and wet lands within 500 feet |
| 4) Draw proposed construction | 8) Contractor/owner will stake 2 adjacent lot lines |

Signature of Applicant/Agent: _____ Date : _____