Building Permit Application For Ontwa Township

26225 U.S. 12

Edwardsburg, MI 49112

269-663-2347

APPLICANT TO COMPLETE SECTIONS 1, 2, AND 3								
1. Applicant Identification								
A. Job Address:								
B. Occupant Name:								
C. Owner Name:								
Address			City			State	Zip	
Email Address			Telephone/Cen					
D. Contractor Name:						Ctata	7in	
Address				City		State	Zip	
E-mail Address			l l	Telephone		Fax		
Duildors Licence			Evoiration Date	Expiration Date Workers Comp In			urance Carrier or reason for exemption	
Builders License			Expiration Date	Expiration Date		workers companisurance carrier or reason to exemption		
2. Project Description								
A. Type of Project:								
Residential	Repair/Replacement	Remodel INT E	XT (Check one) F	ence Location	Front	Back	Side	
Commercial	Commercial Only:							
	Demolition Relocation Note: Residential fences and Sheds under 200 sf must be applied							
Industrial	For under zoning permit							
Other								
Work Description:								
3. Applicant/ Authorized Agent Information								
Applicant is responsible for the payment of all fees and charges applicable to the application and must provide the following information.								
Name: Phone:								
Address:		City:	City:		State	Zip code		
Therefore a stiff when the constraint is such as fall to the constraint.								
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, act no. 230 Of the Public Acts Of 1972, being Section 125.1523a Of the Michigan Compiled Laws, prohibits a								
person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential structure. Violators Of the Section 23a are subject to civil fines.								
Estimated Cost of Project:								
Signature of: Signature:								
Owner	Contractor Agent							
4. Payment Validation/Approval (for department use only)								
Permit Fee		Plan review fee	Method of pa	yment [Cash	Check		
Building Approval Signature					Date			
Zoning Approval Signature				Da		Date		