

Residential Building Permit Application



Charter Township of Independence
 Building Department
 6483 Waldon Center Drive Clarkston, MI 48346
 Phone: 248-625-8111 Option #1 - www.indtwp.com

Permit # _____

Applicant to Complete All Items in Sections 1 – 16

Authority: 1972 PA 230
 Completion: Mandatory to obtain permit
 Penalty: Permit can not be issued

1. Project Information				
Site Address:		Sidwell / Parcel ID#:		Zoning:
Subdivision:			Lot Number/Unit Number:	
Cross Streets:				
2. Homeowner				
Name:			Phone:	
Address:		City/State/Zip:		
3. Contractor, if other than Homeowner				
Company Name:			Phone:	
Address:		City/State/Zip:		
Licensee:		Builders License Number:	Exp. Date:	
Address:		City/State/Zip:	Phone:	
Federal Employer ID Number or Reason for Exemption:				
Workers Comp Insurance Carrier or Reason for Exemption:				
MESC Employer Number or Reason for Exemption:				
4. Type of Improvement				
<input type="checkbox"/> New Home	<input type="checkbox"/> Addition	<input type="checkbox"/> Remodel	<input type="checkbox"/> Garage - Attached	<input type="checkbox"/> Swimming Pool – In Ground
<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair	<input type="checkbox"/> Garage - Detached	<input type="checkbox"/> Swimming Pool – Above Ground
<input type="checkbox"/> Pre-Manufactured	<input type="checkbox"/> Demolition	<input type="checkbox"/> Deck	<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Other – Specify _____
5. Proposed Use of Building				
6. Square Feet *Plans must be sealed if construction exceeds 3,500 sq ft*				
New Home/ Improvement:			Garage / Structure / Deck / Pool / Other:	
7. Foundation Material (Cement, Post, Block, Wood)				
8. Exterior Wall Cover (Wood, Brick, Aluminum, Other)				
9. Heat Fuel (LP, Gas, Solid Fuel, Electric, Oil)				

Visit our website @ www.indtwp.com
 for additional Building Department information and forms

Permit # _____

10. Water Supply: Water / Septic / Township Water / Township Sewer			
Oakland County Septic Permit #:	Expiration Date:	Oakland County Well Permit #:	Expiration Date:
*Septic System Must be 100' From a Body of Water *Must be shown on Plot Plan			
<input type="checkbox"/> Independence Township Sewer		<input type="checkbox"/> Independence Township Water	
11. Lot Size			
Frontage:		Depth:	
12. Corner Lot			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
13. Setbacks			
Front:	Side:	Side:	Rear:
14. On this property, are there:			
<input type="checkbox"/> Bodies of Water?	<input type="checkbox"/> Flood Plains?	<input type="checkbox"/> Wetlands?	<input type="checkbox"/> Easements?
15. Subdivision Control Committee Approval Required			
<input type="checkbox"/> Yes Signature: _____		<input type="checkbox"/> Not required	
16. Estimated Cost of Construction			

Note: Separate Applications must be completed for Electrical, Mechanical and Plumbing Work Permits

I hereby certify that the proposed work is authorized by owner of record and that I have been authorized by the owner to make application as his/her authorized agent and we agree to conform to all applicable codes of the State of Michigan and Independence Township. Applicant further certifies that proposed structure meets all requirements of the State of Michigan Energy Code, that soil conditions are suitable for proposed structure and all minimum load-bearing requirements for said structure. Applicant understands that use or occupancy of proposed building is prohibited by the State of Michigan Construction Code until all final inspections and occupancy permits are issued by the Independence Township Building, Planning and Zoning Department.

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523a, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of sections 23a are subjected to civil fines.

Signature of Applicant: _____ Date: _____

Printed Name: _____

Drivers License No: _____ Exp. Date: _____

Email Address: _____

Original Signatures Only – Faxed Signatures will not be accepted.

Plot plan to scale must accompany construction plans and job sites must be marked.

