**OFFICE (586) 690-8664 \* STEVE THE OWNERS MOBILE (586) 344-4289**

**CLICK ON LINK TO EMAIL US:**

**buildyourownhomeservices@gmail.com** **or** **steve@buildyourownhomeservices.com**

**DATE: October 9, 2025**

***PROPERTY INFO REQUEST FOR RESIDENTIAL HOME BUILDING CONSULTATION***

#### OFFICE USE ONLY

 DATE OF REQUEST

 **\_\_\_\_\_\_\_\_\_\_\_\_**

WEB SITE **\_\_\_\_\_\_**

INTERNET **\_\_\_\_\_\_**

FAMILY **\_\_\_\_\_\_**

FRIEND **\_\_\_\_\_\_**

FLIER/INSERT **\_\_\_\_\_\_**

## REF. BY:

##  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOMEOWNER(S) NAME:** **\_ \_**

**CURRENT ADDRESS: \_ \_**

**CITY / ZIP CODE: \_ \_ \_**

**SUBDIVISION: \_ \_**

**CROSS STREETS: N S E W OFF : \_** **\_**

 **N S E W OF: \_ \_**

**CONTACT NUMBERS:**

 **HOME #: ( ) \_**

**WORK #: ( ) \_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_** **CELL #: ( ) \_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CELL #: ( ) \_**

**E-MAIL: \_ @ \_**

**E-MAIL: \_ @ \_**

**ADDITIONAL INFO: \_ \_**

**ADDITIONAL INFO: \_ \_**

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**HAVE YOU PURCHASED THE PARCEL/LOT YOU ARE BUILDING YOUR HOME ON: YES: \_ \_ NO: \_\_**

**DID THE CITY/TWP APPROVE YOUR PARCEL/LOT FOR RESIDENTIAL HOME BUILDING: YES: \_ \_ NO: \_\_**

**APPROXIMATE SQ. FT. OF HOME TO BE BUILT: \_\_ SQ. FT.**

**IS THERE LAND CLEARING OR CIVIL ENGINEERING NEEDED FOR PERMIT APPROVAL: YES: \_\_ NO: \_\_**

**IS THERE ANY LAND ELEVATION, TOPO, WATER, TRIBAL OR MINERAL RESTRICATIONS:** **YES: \_\_ NO: \_\_**

**IS THERE A TREE SPICIES RESTRICATION OF REMOVAL/REPLACE WITH TREE FUND YES: \_\_ NO: \_\_**

**SLAB:YES: \_\_ NO:\_ CRAWL SPACE:YES: \_\_ NO: \_ \_ PIERS:YES: \_\_ NO: \_ \_ BASEMENT:YES: \_ \_ NO: \_\_**

**IF YES: BASEMENT TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** **IF YES: IS BASEMENT TO** **BE FINISHED YES: \_\_ NO: \_ \_**

**TYPE OF WASTE SYSTEM WILL YOUR NEW HOME HAVE: CITY/TWP. SEWAGE: \_\_ SEPTIC TANK: \_ \_**

**IF CITY/TWP. SEWAGE IS THE WASTE SEWER CONNECT ON YOUR SIDE OF THE STREET: YES:** **\_\_ NO: \_\_**

**TYPE OF WATER SYSTEM WILL YOUR NEW HOME HAVE: CITY/TWP.: \_\_ WELL: \_ \_**

**APPROXIMATE HOME BUILDING BUDGET: $** **\_ \_**

**DO YOU HAVE ANY OTHER HOME BUILDING ESTIMATES: YES: \_\_ NO: \_\_ IF YES HOW MANY: \_\_**

**ON A SCALE FROM 1 TO 10 (10 BEING THE SIGNING OF CONTRACTS TO BUILD YOUR HOME): \_ \_**

**PROJECTED START DATE FOR BUILDING PROJECT: \_ \_**

**AMMENITIES WANTED & REQUESTED TO BE PART OF BUILD/BUILT**

**GARAGE: YES: \_ \_ NO: \_\_ IF YES: HOW MANY CAR: \_ WIDTH: \_\_ LENGTH \_ \_**

**EXTERIOR IN GROUND POOL YES: \_\_ NO: \_ \_ INTERIOR POOL: YES: \_\_ NO: \_ \_**

**FENCE IN BACK YARD: YES: \_\_ NO: \_ IF YES: WHAT TYPE OF FENCE: \_ \_**

**POLE BARN: YES: \_ \_ NO: \_\_ IF YES: WIDTH: \_\_ LENGTH \_ \_**

**FLOOR DRAIN IN CONCRETE IN THE POLE BARN: YES: \_ \_ NO:** **\_\_**

**IS WATER REQUESTED FOR POLE BARN: YES: \_ \_ NO: \_\_ IF YES: COLD WATER: \_ \_ HOT WATER: \_ \_**

**IS THERE A HORSE BARN REQUESTED FOR BUILD: YES: \_\_ NO: \_ \_ IF YES: \_ WIDTH: \_\_ LENGTH \_ \_**

**PLUMB DRAIN FOR SINK AND INSTALL SINK & DOG WASHING STATION IN POLE/BARN:** **YES:** **\_ \_ NO: \_\_**

**IS THERE GOING TO BE A POND: YES: \_\_ NO: \_\_ IF YES: WIDTH: \_\_ LENGTH \_ ACRES: \_**

**IS THERE EXISTING BUILDING(S) AMMENTIES ETC. EXITING ON THE LOT/PARCEL: YES: \_\_ NO: \_ \_**

**IF YES DESCRIBE DETAILS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**WHAT IS THE SIZE OF LOT: WIDTH: \_\_ LENGTH \_ ACRES: \_**

**DID THE CITY OR TOWNSHIP ASSIGN AN ADDRESS FOR THE PARCEL/LOT: YES: \_\_ NO: \_\_**

**DO YOU HAVE THE ADDRESS OF THE PARCEL/LOT TO BE BUILT ON: YES: \_ \_ NO: \_\_**

**DO YOU HAVE THE ADDRESS OF THE PARCEL/LOT TO BUILD ON:**

**STREET ADDRESS: \_ \_ \_**

**CITY / ZIP CODE:**  **\_ \_\_**

**SUBDIVISION NAME: \_ LOT# \_**

**DO YOU HAVE THE PARCEL I.D.#: YES: \_ \_ NO: \_\_**

**IF YES: WHAT IS THE PARCEL I.D.#:**  **\_**

**IF YES: TO A PARCEL I.D.# HAS THE LOT BEEN SPLIT WITH MULTIPLE PARCEL I.D. #: YES: \_\_ NO: \_ \_**

**IF YES: WHAT ARE THE PARCEL I.D.#: \_ I.D.#: \_**

**I.D.#: \_ ID#: \_ I.D.#: \_**

**I.D.#: \_ ID#:**  **\_ I.D.#: \_**

**HAS A SOIL PERKS TEST BEEN DONE ON YOUR LOT: YES: \_\_ NO: \_ \_**

**IS A SOIL EROSION PERMIT REQUIRED BY THE CITY/TWP.: YES: \_\_ NO: \_\_ UNKNOWN : \_\_**

**IF YES HAS IT BEEN APPLIED FOR OR ISSUED: YES: \_\_ NO: \_\_ YES & EXEPMT: \_\_**

**IF YES OR EXEMPT WHAT IS THE PERMIT#: \_**

**IS THE ELECTRIC AT THE STREET: YES: \_ \_ NO: \_\_ UNKNOWN : \_\_**

**IS THERE A NATURAL GAS MAIN FOR THE BUILD YES: \_\_ NO: \_ \_ UNKNOWN: \_\_**

**IF YES: IS THE NATURAL GAS MAIN ON YOUR SIDE OF THE STREET: YES:** **\_\_ NO: \_\_ UNKNOWN: \_\_**

**ARE YOU PLANNING ON USING OTHER ENERGY SOURCES FOR YOUR HOME: YES: \_ \_ NO: \_\_**

**IF YES: WHAT IS THE ENERGY SOURCE: PROPANE: \_ \_ SOLAR: \_\_ GEOTHERMAL: \_\_ OTHER: \_\_**

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**DO YOU HAVE A SITE PLAN:** **YES:** **\_\_ NO: \_\_**

**IF YES YOU DO HAVE A SITE PLAN WHAT TYPE: ARCHITECTURAL \_\_ OR ENGINEERING \_\_**

**DO YOU HAVE A PLOT PLAN: YES: \_\_ NO: \_\_**

**IF YES YOU HAVE AN ENGINEERING COMPANY PLEASE LIST THE NAME, ADDRESS AND PERSON(S) OF CONTACT**

**DO YOU HAVE THE ENGINEERING REPORT YES: \_\_ NO: \_\_**

**ARE YOU WORKING WITH AN ENGINEERING COMPANY: YES: \_\_ NO: \_\_**

**COMPANY NAME:**  **\_**

**STREET ADDRESS: \_**

**CITY / ZIP CODE: \_**

**CONTACT NAME: \_ TITLE: \_**

**ALTERNATE CONTACT NAME: \_ TITLE: \_**

**ENGINEERING COMPANY CONTACT INFO:**

**OFFICE #: ( ) EXT# \_**

**CONTACT NAME: \_ TITLE: \_ CELL #: ( ) \_**

**E-MAIL:** **\_ @ \_**

**ALTERNATE CONTACT CELL #: ( ) \_**

**ALTERNATE EMAIL: \_ @ \_**

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**DO YOU HAVE THE SURVEY REPORT: YES: \_ \_ NO: \_\_**

**ARE YOU WORKING WITH A SURVEY COMPANY: YES: \_\_ NO: \_\_**

**SAME AS ENGINEERING COMPANY: YES: \_\_ NO: \_\_**

**IF YES THAT YOU HAVE A SEPARATE SURVEY COMPANY OTHER THAN THE ENGINEERING COMPANY PLEASE LIST THE NAME, ADDRESS AND PERSON(S) OF CONTACT**

**COMPANY NAME: \_**

**STREET ADDRESS: \_**

**CITY / ZIP CODE: \_**

**CONTACT NAME: \_ TITLE: \_**

**ALTERNATE CONTACT NAME: \_ TITLE: \_**

**SURVEY COMPANY CONTACT INFO:**

**OFFICE #: ( ) EXT# \_**

**CONTACT NAME: \_ TITLE: \_ CELL #: ( ) \_**

**E-MAIL: \_ @ \_**

**ALTERNATE CONTACT CELL #: ( ) \_**

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**DO YOU HAVE A STRUCTURAL ENGINEER WORKING ON YOUR PROJECT:** **YES: \_\_ NO: \_\_**

**IF YES THAT YOU HAVE A STRUCTURAL ENGINEER PLEASE LIST THE NAME, ADDRESS AND PERSON OF CONTACT**

**COMPANY NAME: \_**

**STREET ADDRESS: \_**

**CITY / ZIP CODE: \_**

**CONTACT NAME: \_ TITLE: \_**

**ALTERNATE CONTACT NAME: \_ TITLE: \_**

**STRUCTURAL ENGINEER COMPANY CONTACT INFO:**

**OFFICE #: ( ) EXT# \_**

**CONTACT NAME: \_ TITLE: \_ CELL #: ( ) \_**

**E-MAIL: \_ @ \_**

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**DO YOU HAVE AN ARCHITECT WORKING ON THE HOME BUILDING PROJECT: YES: \_\_ NO: \_\_**

**DO YOU HAVE A BLUEPRINT YOU ARE USING ON THE HOME BUILDING PROJECT: YES: \_\_ NO: \_\_**

**ARE YOU USING A BLUEPRINT BROKER ON THE HOME BUILDING PROJECT: YES: \_\_ NO: \_\_**

**IF YES THAT YOU HAVE AN ARCHITECT OR BLUEPRINT BROKER PLEASE LIST THE NAME, ADDRESS AND PERSON OF CONTACT**

**COMPANY NAME: \_**

**STREET ADDRESS: \_**

**CITY / ZIP CODE: \_**

**CONTACT NAME: \_ TITLE: \_**

**ALTERNATE CONTACT NAME: \_ TITLE: \_**

**ARCHITECT OR BLUEPRINT BROKER COMPANY CONTACT INFO:**

**OFFICE #: ( ) EXT# \_**

**CONTACT NAME: \_ TITLE: \_ CELL #: ( ) \_**

**E-MAIL: \_ @ \_**

**ALTERNATE CONTACT CELL #: ( ) \_**

**ALTERNATE EMAIL: \_ @ \_**

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