



# BUILDING PERMIT APPLICATION

Building Department, City of Inkster  
 26215 Trowbridge, Inkster, Michigan 48141  
 building@cityofinkster.com  
 Inspection Line: 313-563-7716

**Property Address:** \_\_\_\_\_ **Date** \_\_\_\_\_  
 All permit requests must have an address

Property I.D. Number \_\_\_\_\_ Subdivision \_\_\_\_\_ Zoning \_\_\_\_\_

\_\_\_\_\_ Existing Bldg  
 \_\_\_\_\_ New Bldg

**Contractor Information:**

\_\_\_\_\_ Commercial  
 \_\_\_\_\_ Residential

Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Federal I.D. \_\_\_\_\_

**Architect/Designer/Engineer Information:**

Company name \_\_\_\_\_ State License # \_\_\_\_\_ Telephone# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Property Owner Information:**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature: \_\_\_\_\_

Applicant's Email Address: \_\_\_\_\_

<b>Ownership</b> <input type="checkbox"/> Private <input type="checkbox"/> Government	<b>Applicable Code:</b> <input type="checkbox"/> 2015 MI Bldg. Code <input type="checkbox"/> 2015 MI Res. Code <input type="checkbox"/> 2015 MI Rehab Code for Existing Buildings	<b>USE GROUP(S)</b>			
		<input type="checkbox"/> A-1	<input type="checkbox"/> E	<input type="checkbox"/> H-4	<input type="checkbox"/> M
		<input type="checkbox"/> A-2	<input type="checkbox"/> F-1	<input type="checkbox"/> H-5	<input type="checkbox"/> R-1
<b>Proposed Construction Type as per Michigan Code:</b> _____ _____ _____		<b>Improvement Type:</b> <input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Relocate <input type="checkbox"/> Foundation			
		<input type="checkbox"/> A-3	<input type="checkbox"/> F-2	<input type="checkbox"/> I-1	<input type="checkbox"/> R-2
		<input type="checkbox"/> A-4	<input type="checkbox"/> H-1	<input type="checkbox"/> I-2	<input type="checkbox"/> R-3
		<input type="checkbox"/> A-5	<input type="checkbox"/> H-2	<input type="checkbox"/> I-3	<input type="checkbox"/> S-1
		<input type="checkbox"/> B	<input type="checkbox"/> H-3	<input type="checkbox"/> I-4	<input type="checkbox"/> S-2
		<input type="checkbox"/> U	<input type="checkbox"/> Other (specify) _____		
<b>Structural Type:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Other – specify: _____ <input type="checkbox"/> Masonry _____ <input type="checkbox"/> Concrete _____ <input type="checkbox"/> Wood _____		<b>OFFICE USE ONLY</b>  Plan Review Number: _____  Permit Number: _____			

Section 23a of the State Construction Act of 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. Violations of Section 23a are civil infractions. I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner and that I have been authorized as the owner's agent. All work to meet all currently adopted code requirements.

Applicant's Signature \_\_\_\_\_ Address \_\_\_\_\_ Telephone \_\_\_\_\_

**The following items must be submitted with application:**

**Residential:**

**New Construction** – An electronic file of plans and specifications. Two sets (2) sealed site grade plans; Two paper (2) complete sets of building plans that include **electrical, mechanical, & plumbing details; and other trades as needed; elevations; floor plans; wall section(s); foundation plan; truss/roof design; door/window schedules.**

**Residential additions & alterations** –An electronic file of plans and specifications; Two (2) complete prints that include the information highlighted above.

**Commercial:**

An electronic file of plans and specifications and two (2) sealed and signed sets of construction plans, as highlighted above.

**Plan Review Schedule:**

**Building Plan Review Fee:** First \$300,000 of construction cost x .0013, remainder of cost x .0005 (\$100 minimum). Mechanical, plumbing, & electrical review fees are 25% of building review fee. Applicant is required to submit separate application for soil erosion to Wayne County.

**Site grade review fee:**

Residential – \$100.

Commercial – \$100 for first acre, \$50 for each additional acre or fraction thereof.

Application Fee           \$ 40.00

Plan Review Fees:

Building                         \$ \_\_\_\_\_

Mechanical                    \$ \_\_\_\_\_

Plumbing                       \$ \_\_\_\_\_

Electrical                      \$ \_\_\_\_\_

TOTAL                            \$ \_\_\_\_\_

**Description of work:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*CONTRACTORS MUST SUBMIT SIGNED CONTRACT WITH APPLICATION\*\***

Construction Cost \$ \_\_\_\_\_

**DEPARTMENT USE ONLY**

**Zoning Review:** Lot Area \_\_\_\_\_ Lot Coverage (%) \_\_\_\_\_ Zoning District \_\_\_\_\_

Planning Approval needed? \_\_\_\_\_ Planning Commission? \_\_\_\_\_

Variance Required? \_\_\_\_\_ Variance Information \_\_\_\_\_

Approved BY \_\_\_\_\_ Date \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# HOMEOWNER ROOF SPECIFICATIONS

**Address:** \_\_\_\_\_ **Permit #** \_\_\_\_\_

1. Tear off \_\_\_\_\_ Recover \_\_\_\_\_
2. replacing decking? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Underlayment Felt \_\_\_\_\_ lb. Synthetic \_\_\_\_\_
4. Type of Shingles \_\_\_\_\_
5. Roof Pitch \_\_\_\_\_
6. Approximate square footage of roof \_\_\_\_\_
7. Replacing vents? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Type of vents Ridge \_\_\_\_\_ Can \_\_\_\_\_ Other \_\_\_\_\_

Ice & water shield minimum 24" beyond interior walls.

New Flashing required.

New Pipe boots required.

Drip Edge required.

**Homeowner:** \_\_\_\_\_  
Signature \_\_\_\_\_ Print Name \_\_\_\_\_