

Luce County Building and Zoning Department

\$75.00 IF THIS PERMIT IS NOT POSTED
IN AN EASILY SEEN AND ACCESSIBLE
LOCATION (Inspector's #) _____
Inspector's Name _____

407 West Harrie St
Newberry, MI 49868
(906) 293-8659
Fax: (906) 293-5501

MISSED INSPECTIONS, \$75.00
Permit # _____
See back of permit
for inspection schedule

Building Permit App./Plan Review/SITE CARD

READ THIS !!! MUST BE FILLED OUT COMPLETELY OR PERMIT WILL NOT BE ISSUED!!! READ THIS

Owner: _____ Contractor: _____ Lic.# _____
Home Address: _____ Address: _____
Email: (recommended) _____ Email: (recommended) _____
Zip: _____ Phone: _____ Zip: _____ Phone: _____
Site Address (Directions): _____
Tax / Parcel Number: _____ Section _____ Town _____ N Range _____ W from Equalization
(906) 293-8611

A. TYPE OF STRUCTURE: (mark an (x) on spaces that apply to this construction project)

Home or Cabin: 1-Story ___ 2-Story ___ 3-Story ___ Duplex ___ Addition to Home ___ Utility Shed ___
Nonattached Garage ___ With Storage Trusses? ___ Attached Garage ___ With Storage Trusses? ___
Commercial ___ Demolition ___ Single Wide Mbl. Home ___ Double Wide Mbl. Home ___ Modular Home ___
Renovation ___ Foundation only ___ Barrier-Free Ramp ___ Deck ___ Stairs ___ Patio ___ Gazebo/Sunroom ___
Pole Building ___ Basement ___ Concrete Driveway ___ Curbs ___ Sidewalk ___ Addition ___ Other _____

B. Dimensions: !!! must complete all lines below that apply to project or permit WILL NOT be issued and will be delayed!!!

1st Floor Dwelling: Width? _____ Length? _____ Frame Wall Height? _____
2nd Floor Dwelling: Width? _____ Length? _____ Frame Wall Height? _____
3rd Floor Dwelling: Width? _____ Length? _____ Frame Wall Height? _____
Basement: Width? _____ Length? _____ Finished? ___ or, Not Finished? ___ (mark one)
Garage/Pole Building or Shed: Width? _____ Length? _____ Frame Wall Height? _____ or Post Height? _____
Decks/Ramps or Slabs: Width? _____ Length? _____ Height? _____ (rails and guards required when over 30" high)
Commercial: Width? _____ Length? _____ Overall Bldg. Height? _____ Engineer Seals Included ___ (check)

C. Sq.Ft. of: 1st Floor _____ 2nd Floor _____ 3rd Floor _____ Basement _____ Decks _____ Garage/Shed _____ !!! must complete all lines below that apply to project or permit WILL NOT be issued and will be delayed!!!

D. Code Information: Mark an (x) on spaces that apply and write in dimensions where requested.

- 1) Footing Size? _____ Size and How Many Re-Bars Required? _____ Inches Below Grade? _____
- 2) Crawl Space: Vented Insul. Floor (R19)? ___ or, Unvented & Heated Insul. Wall (R-15 Foam)? _____
- 3) Basement: Unfinished? ___ (R-19 under floor) or, Finished? ___ (R-15 wall foam or R-19 Cavity)
- 4) Anchors? 1/2" x 10" min. bolts 6' on center and 1' from joints ___ or, straps ___ 4' and 1' (R403.1.6, pg. 93)
- 5) Floor Beam Supports: Spacing Apart? _____ Floor Beams: Size? _____ Species? _____ Grade? _____
- 6) Pole Building Carrier Beam: size and how many on each side? _____ Post Spacing? _____
- 7) Floor Joist Span? _____ Joist Size? _____ Species? _____ Spacing? _____ (table R502.3.1(1), pg. 125 & 126, Mi Res Code)
- 8) Exterior Wall Thickness? _____ Stud Spacing? _____ Insulation? _____ (R-20 minimum or N/A)
- 9) Rafter Size _____ Species & Grade _____ Spacing _____ Span _____ (see table R502.5.1(7), pg. 381, 2015 Mi Res Code)
- 10) Ceiling Joist Size _____ Span _____ Species _____ Spacing _____ Ridge Beam Dimensions _____
- 11) Trusses ___ (49% live load min.) Spacing _____ Ceiling Insulation? _____ (R-49 minimum or N/A)
- 12) Bedroom Window: Width? _____ Height? _____ Sill height above floor _____ (20" X 24" clear opening)

NOTE: Window and Door opening headers and number of support studs, must comply to table R602.7(1) on Pg. 167 of the 2015 Mi Res Code.

Approved: _____ Date: _____ Project Cost: (required) _____
(Please fill in an accurate, estimated, amount, including labor).

Signature of Applicant _____ Signifies that the applicant is aware that a handbook for the
current Michigan Residential Code is available to research or purchase at the Building Department Office or online and
agrees to comply to all requirements of the Code. **MUST BE SIGNED OR A PERMIT WILL NOT BE ISSUED!!!**

4. HEALTH DEPARTMENT APPROVAL

If proposed construction is a dwelling (includes camps), or involves adding bedroom to a dwelling, approval of the on-site sewage disposal system must be obtained from the Luce-Mackinac-Alger-Schoolcraft District Health Dept. before a building permit can be issued. This provision does not apply if the dwelling will be served by city sewer.

A copy of a permit to install a septic system or privy, a letter authorizing the use of an existing system, or other written approval by the Health Dept. must be included with this application.

By signing this application the applicant understands that it is his/her sole responsibility to ensure that any other permits which may be required by state or federal law are acquired prior to the beginning of this project.

5. APPLICANT INFORMATION

Applicant is responsible for payment of all fees, and must provide the following information:

Section 23a of the State Construction Code Act, 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 building or a residential structure. Violators of Section 23a are subject to civil fines.

I hereby certify that the information contained in this application, and in the plans and specifications accompanying this application are true and complete and contain a correct description of the building or structure, lot, and proposed work.

Signature of Applicant

Date

PLEASE NOTE: If applicant is other than the person listed as "LANDOWNER", this application must be accompanied by an architectural, engineering or construction contract, power of attorney, or following authorization designating the applicant as agent, attorney, architect, engineer or builder.

6. LANDOWNER AUTHORIZATION (To be completed prior to submission of application for building permit.)

I, _____, owner in fee of the
above-described land upon which the proposed construction is to occur,
hereby designate and authorize _____
as (attorney/architect/engineer/builder - choose one and enter)
_____ for the building and construction on my property for
which this application is made. Date: _____

Signature of Landowner: _____

Print Name _____

APPROVED FOR CONSTRUCTION*

_____ Date: _____

Mark Rivard, Luce County Code Official

*Required Inspections (If checked): \$75.00 EACH

___ Footing ___ Foundation ___ Framing

___ Insulation ___ Final

NOTES:

FOOTING _____

FOUNDATION _____

FRAMING _____

INSULATION _____

FINAL _____

FEES: FOR DEPARTMENT USE

Calculations

SF RESIDENTIAL	.47x_____ sq foot
"Off grid "cabin	.25x_____ sq foot
PORCH/DECK/SLAB	.06X_____ sq foot
GARAGE	.10x_____ sq foot
POLE BARN	.10x_____ sq foot
INSPECTION	\$75.00 X # of insp.
PLAN REVIEW	\$50.00 min. + \$50.00 per hr
COMMERCIAL	for incomplete application
CONCRETE DRIVEWAY	.06X_____ Sq foot
UNFINISHED BASEMENT	.08 X_____ Sq Foot
ZONING	\$50.00 + (.0015 x _____)
OTHER	value
TOTAL AMOUNT	
RECEIPT #	

****PLEASE READ CAREFULLY, COMPLETE ALL
SECTIONS, AND ATTACH DRAWINGS AND
MATERIAL SPECS****

Copies for:

Applicant _____

Assessor _____

File _____

Building Insp _____

Luce/Schoolcraft County Building and Zoning Dept.
(906) 293-8659 (906) 341-3678

MINIMUM DRAWING REQUIREMENTS
(PRESCRIPTIVE COMPLIANCE FOR):
Residential Dwellings and Additions

2015 Michigan Residential Code

YOU MUST SUBMIT A FLOOR PLAN SKETCH WITH THIS INCLUDED:

(CHECK OFF all items BELOW before submitting app to Building Dept., incomplete sketches WILL NOT be reviewed)

- Exterior dimensions
- Dimensions of all interior rooms
- All interior room uses named on drawing (i.e. bedroom, living room, bath, etc.)
- Location and dimensions of all window and door openings (Width x Height)
- Height of all window sills above finished floor (i.e. ____ inches above floor)
- Sizes of all **LOAD BEARING** window and door headers (i.e. (2) 2" x 12")
- Total number of jack studs supporting window and door headers

YOU MUST SUBMIT AN EXTERIOR WALL SKETCH WITH THIS INFO:

(CHECK OFF all items BELOW before submitting app to Building Dept., incomplete sketches WILL NOT be reviewed)

- Footer size (Width x Height)
- Footer Depth (from grade to bottom of footer)
- Foundation Wall (Width x Height)
- Foundation or Basement Wall Insulation and Ignition Barrier (R-15 minimum)
- Sill seal
- Sill plate (Width)
- Wall studs (Width and wall Height)
- Structural Panels (Thickness)
- Interior wall lathe material (Type and Thickness)
- Wall insulation with vapor barrier (Type and R. Value, R-21 minimum)
- Exterior Air and Moisture Barrier
- Exterior Siding
- Top Wall Plates
- Truss or Rafter tie-down method and product name and part number
- Soffit and fascia material and dimensions including roof overhang length
- Truss Live Snow load or rafter and ceiling joist sizes
- Roof pitch
- Ceiling Insulation material (Type and R-value, R-49 minimum)
- Insulation Baffles (if blown-in insulation is planned)
- Roof sheathing material (Type and Thickness)
- Roof Covering Type

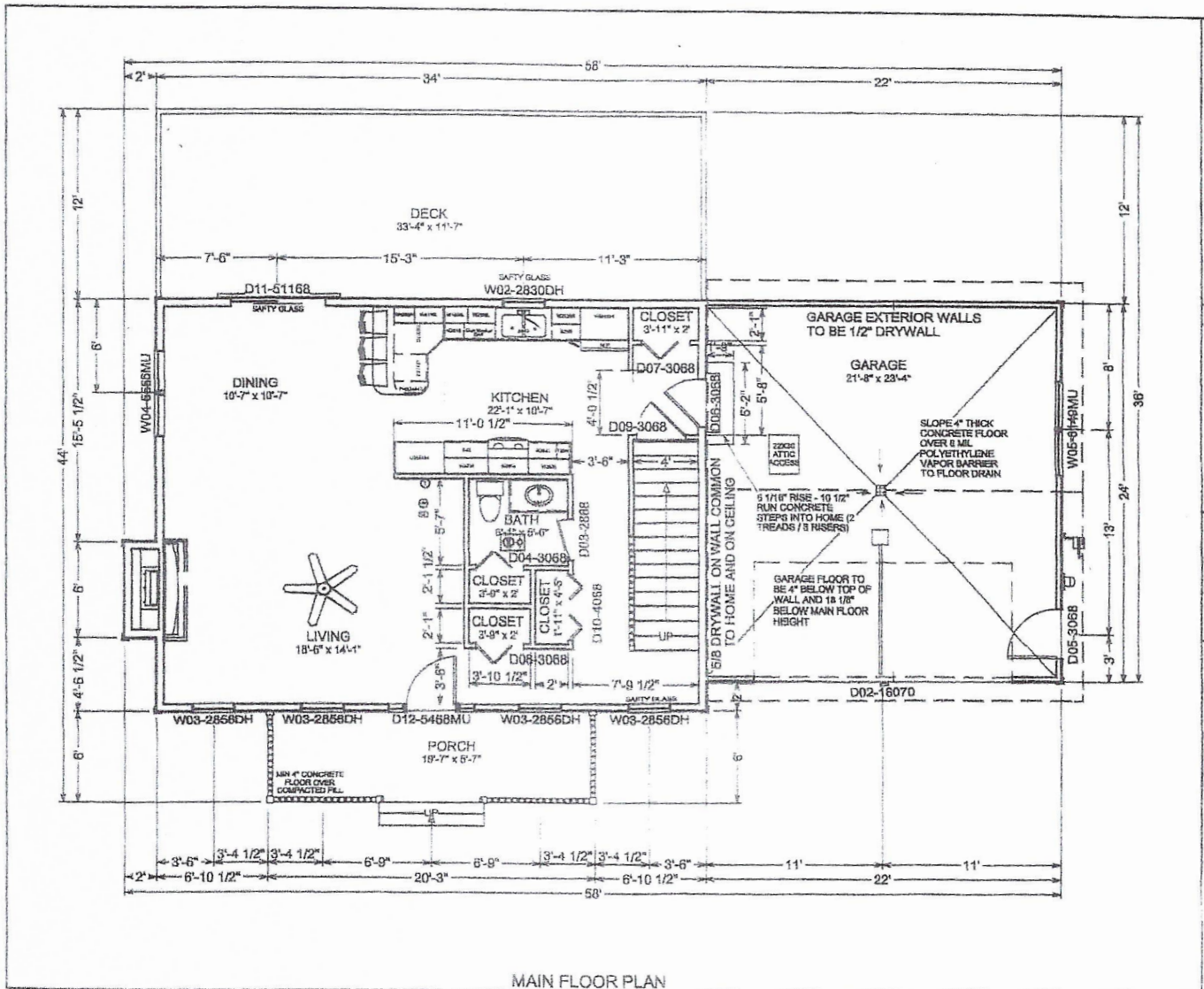
ALL CONSTRUCTION MUST COMPLY WITH THE 2015 M.R.C.!

(If you are not able to provide sketches with this information checked off and included; you will need to seek assistance from someone who is able to provide them for you, or the application will not be reviewed or returned).

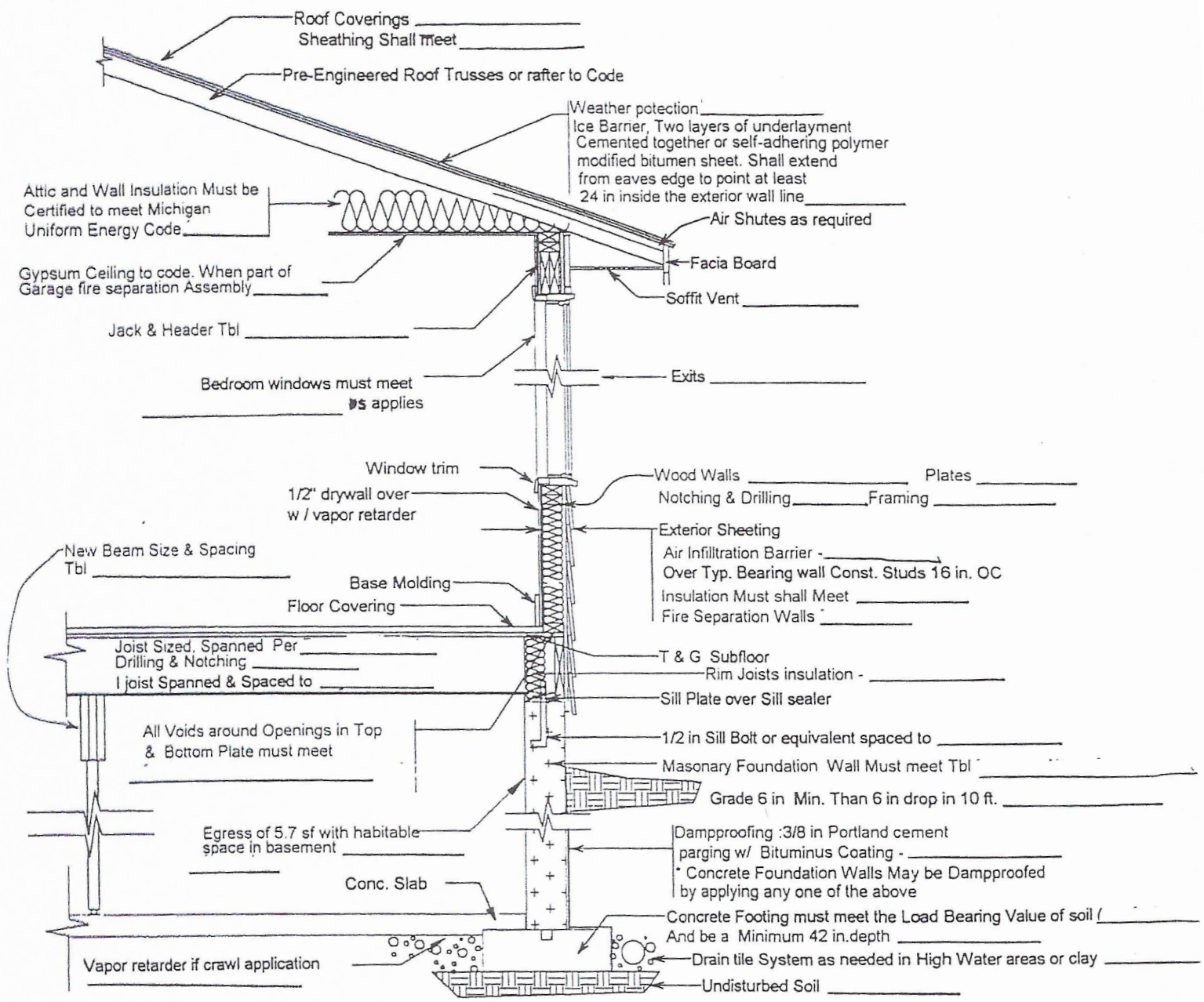
Applicant Signature

Building Department Rep. Signature and submittal Date

EXAMPLE OF A FLOOR PLAN



Compliments of Your Local Building Inspector



Exterior Perimeter Detail

This diagram is NOT intended to be all inclusive.

Handrails _____ Smoke Detector _____

Guards _____ Attic Access _____

Stairways _____

TYPICAL POLE BUILDING SECTION "NTS"

MINIMUM

49 # SNOW LOAD, LL
TOP CORD, DL
BOTTOM CORD, DL

ROOF LOADING

SHINGLES OVR "PLYWD OR
OSB ROOF SHEATHING OVR
TRUSSES @ " O.C.

STEEL ROOFING OVR
2 X " PURLINS OVR
@ " O.C. OVR TRUSSES
@ " O.C.

" OVERHANG

* OWNER OR CONTRACTOR *
DATE

TRUSS CARRIERS

2 X	#2 HF
2 X	#2 SPF
2 X	#2 SYP
2 X	#2 OTHER
2 X	#1 HF
2 X	#1 SPF
2 X	#1 SYP
2 X	OTHER

2 X
" Y " BRACE

" FLOOR TO TRUSS

— X — POSTS .60 FT
@ " O.C. GROUND CONTACT

— X — GIRTS
@ " O.C.

SIDING

2 X — SKIRT BOARD .60 FT
GROUND CONTACT

GRADE SHALL FALL 6"
WITHIN 10' OF BUILDING

" THICK
CONC. FLOOR

FINISHED
GRADE

" THICK CONC.
FOOTING

" DIA. ROUND
" X " SQUARE

FOOTING SIZES FOR POLE BUILDINGS (2000-3000 #PSF soil capacity)

<u>Building Width</u>	<u>8' Pole Spacing</u>	<u># of bags</u>
16 feet	6" thick x 14" dia.	1) 80# bag
20 feet	6" thick x 14" dia.	1) 80# bag
24 feet	8" thick x 16" dia.	1.5) 80# bag
28 feet	8" thick x 18" dia.	2) 80# bag
32 feet	8" thick x 18" dia.	2) 80# bag
36 feet	10" thick x 20" dia.	2.75) 80# bag
40 feet	10" thick x 20" dia.	2.75) 80# bag
48 feet	10" thick x 22" dia.	3.75) 80# bag

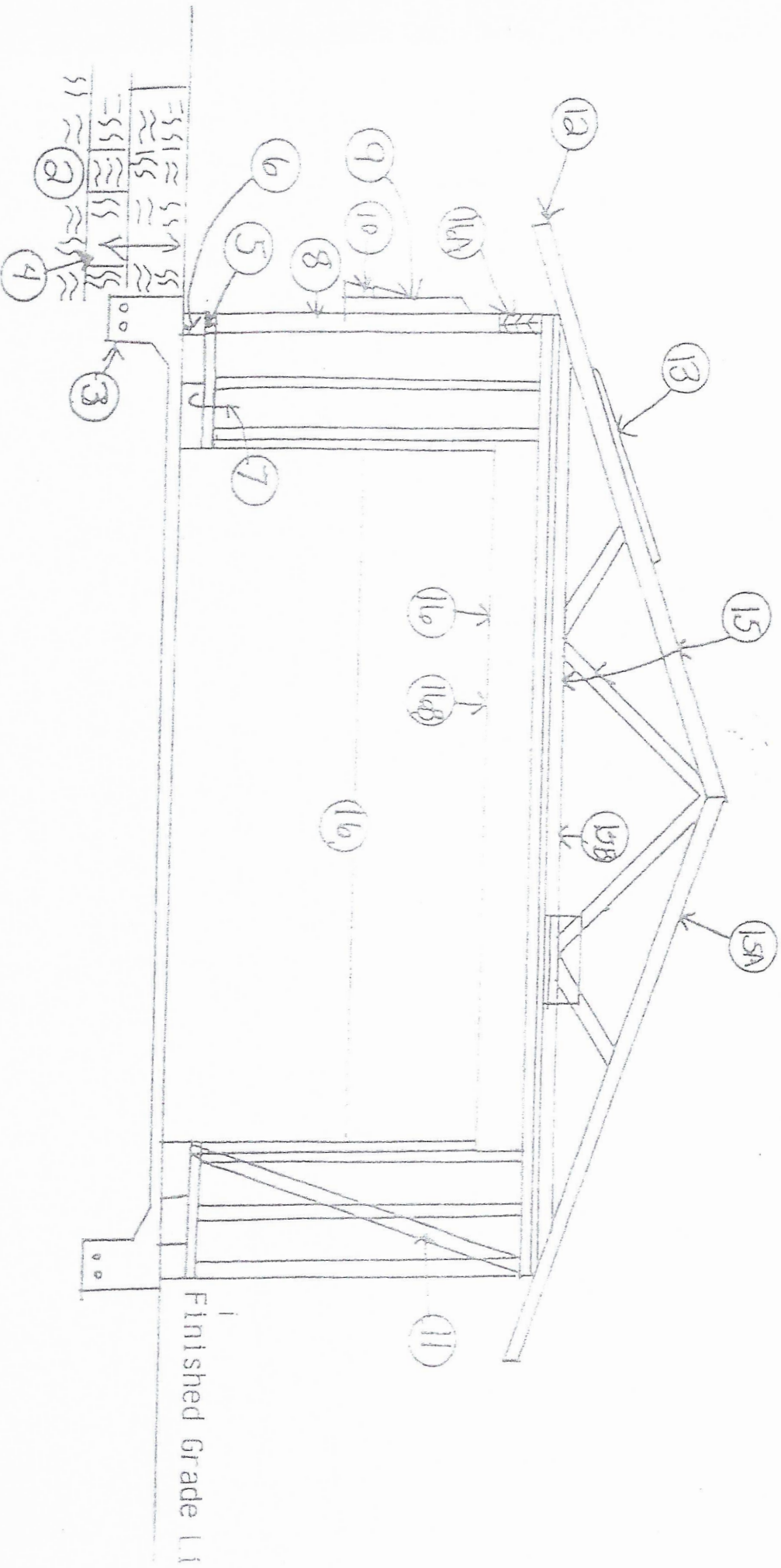
CARRIER PLATE SIZES (8' Pole Spacing)

<u>Building Width</u>	<u>Size</u>
16 feet	2) 2 x 8 # 2 pine or better
20 feet	2) 2 x 10 # 2 pine or better
24 feet	2) 2 x 12 # 2 pine or better
28 feet	2) 2 x 12 # 2 pine or better
30 feet	2) 2 x 12 # 2 pine or better
32 feet	2) 2 x 12 # 2 pine or better
36 feet	3) 2 x 10 # 2 pine or better
40 feet	3) 2 x 12 # 2 pine or better
48 feet	4) 2 x 12 # 2 pine or better

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GARAGE PLAN

FLOATING SLABS ONLY TO BE USED ON UNATTACHED GARAGE



GARAGE PLAN EXAMINATION

OWNER: _____ ADDRESS: _____

BLDG. PERMIT #: _____ DATE: _____ TELEPHONE #: _____

BLUE PRINTS: APPROVED _____ DENIED _____

REMARKS: _____

1. Garage Dimensions: Length _____ Width (roof span) _____ Height of walls _____
2. Soil Type _____
3. Footing Size _____
4. Footing Depth _____
5. Treated Sill: Yes _____ No _____
6. Sill to Ground _____
7. Anchor Bolts: Size _____ Spacing _____
8. Stud Size _____ and Spacing _____
9. Wall Sheating _____
10. Wall Siding _____
11. Wind Bracing _____
12. Drip Edge _____
13. Roof Sheathing Thickness _____
14. Roofing Material _____
15. Commercial Trusses: Spacing _____
- OR: 15A. Rafters: Size _____ Species _____ Grade _____
- 15B. Joists: Size _____ Species _____ Grade _____
16. Garage Door Opening Clear Span _____
- Location: 16A. Bearing Wall _____
- 16B. Gable End _____
17. Garage Door Header: Size _____ Species _____ Grade _____

I HEREBY SUBMIT THE FOLLOWING INFORMATION FOR THE GARAGE STRUCTURE THAT I WILL CONSTRUCT.

SIGNATURE OF OWNER _____ DATE _____

SIGNATURE OF CONTRACTOR _____ DATE _____

Luce County Planning and Development
407 West Harrie Street
Newberry, MI 49868
(906) 293-8659 Fax (906) 293-5501

DATE: .

Demolition Affidavit

Salvaged material removed from structure will be sold or used in a lawful way.

Hazardous material (if any) will remain on site or be disposed of in a lawful way.

A copy of any disposal receipts will be provided to Building Department before final inspection.

X Owner

X Date

Code Administrator Date

Luce County Planning and Development
407 W. Harrie St.
Newberry, Mi. 49868
(906) 293-8659 Fax (906) 293-5501

DATE:

DEMOLITION DEBRIS DISPOSAL STATEMENT

PERMIT # _____

OWNER: _____ PHONE _____

ADDRESS: _____

SITE ADDRESS: _____

CONTRACTOR: _____ PHONE _____

ADDRESS: _____

LANDFILL NAME: _____ PHONE _____

LANDFILL ADDRESS: _____

DATES SENT TO LANDFILL: _____

NUMBER OF LOADS: _____

SIZE OF LOADS: (yards) _____ or (tons) _____

COPIES OF DISPOSAL RECEIPTS INCLUDED: (yes) _____ (no) _____

I _____ attest that any hazardous materials were disposed of in a lawful manner and that the information indicated above is correct and verifiable at the landfill location.

_____ Date _____

Contractor or Owner must sign

NOTE: The parcel or lot will not be eligible for additional permitted improvements until this document is completed, signed and submitted to the Building Department prior to scheduling the final inspection. There will be a \$75.00 additional fee charged (R113.4, can be daily) if permit expires without requesting an extension in writing with a reason for the request, (R105.5) or without passing the final inspection.