



CITY OF ADRIAN

Building/Inspection Department

135 E. Maumee Street

Adrian, MI 49221

Phone (517) 264-4814 Fax (517) 264-8016

Email: inspections@adrianmi.gov

www.adriancity.com

FOR OFFICE USE

Permit # _____

Paid _____

Source _____

Authority: 1972 PZ 230

Penalty: Failure to provide information may result in denial of your request.

The city of Adrian is an equal opportunity employer/program. Auxiliary aids, serves and other reasonable accommodation are available upon request to individuals with disabilities.

I. JOB/FACILITY Address

Street Address:		Type of work:	
Property Owner Name:		Telephone Number:	
Property Owner Address:		City:	State: Zip:
Is property located in Historic District? Yes _____ No _____ If yes, attach "Certificate of Appropriateness" application for Historic Commission review			

II. APPLICANT

<input type="checkbox"/> Contractor/Architect/Engineer		Name:	
<input type="checkbox"/> Homeowner			
Address:		Email address:	
City:	State:	Zip:	Telephone Number:
Contractor	On Site Manager		Builders License # Expiration Date
	Federal Employer ID Number (or Reason for Exemption):		
	Worker's Comp Insurance Carrier (or Reason for Exemption):		
	Unemployment Insurance Agency Employer Account Number (or Reason for Exemption):		

III. ARCHITECT OR ENGINEER

Architect/Engineer	Name:		Contact Person:
	Address:		Email address:
	City:	State:	Zip: Telephone Number:
	License Number		Expiration Date

IV. PLAN REVIEW

Is plan review(s) required for this project? Not Required _____ Yes _____ (check all that apply below)

_____ Building _____ Electrical _____ Mechanical _____ Plumbing _____ Fire Suppression

Three (3) full sets of plans are required when submitting for plan review. Construction documents must be **sealed** and **signed** by an architect or professional engineer in accordance with 1980, PA 299 as amended. The seal and signature is not required for one and two family dwellings less than 3,500 square feet of calculated floor area or public work less than \$15,000 in total construction cost. Plan review(s) must be approved prior to permit issuance.

The City reserves the right to use an outside firm or agency to conduct plan reviews for the purpose of establishing code compliance. The applicant will be responsible for any fees charged by the firm or agency including administrative expensed incurred.

Note: Separate applications must be completed for Electrical, Mechanical, and Plumbing

V. TYPE OF IMPROVEMENT (check all that apply)

☐ New Building ☐ Alteration/Repair ☐ Swimming pool ☐ Basement ☐ Accessory Building
☐ Addition ☐ Strip & Reroof ☐ Garage ☐ Commercial ☐ Manufactured Home
☐ Deck/Ramp ☐ Pier/Footing ☐ Foundation Only ☐ Industrial ☐ Special Inspection
☐ Demolition – Have Utility companies been contacted for disconnect? (Y) or (N)
 Gas _____ Electric _____ Water _____
☐ Other (describe) _____

VI. PROPOSED USE OF BUILDING

- Residential
 One-Family _____ Garage (detached) _____ Garage (attached) _____
 Two (or more) Family _____ # of unit's _____ Hotel, Motel _____ # of unit's _____
 Other _____
- Non-Residential
 Amusement _____ Service Station _____ Library, Educational _____
 Church Religion _____ Hospital, Institutional _____ Store, Mercantile _____
 Industrial _____ Office, Bank, Professional _____ Tanks, Towers _____
 Storage _____ Other _____

VII. DETAILED DESCRIPTION OF WORK

VIII. DIMENSIONS/DATA

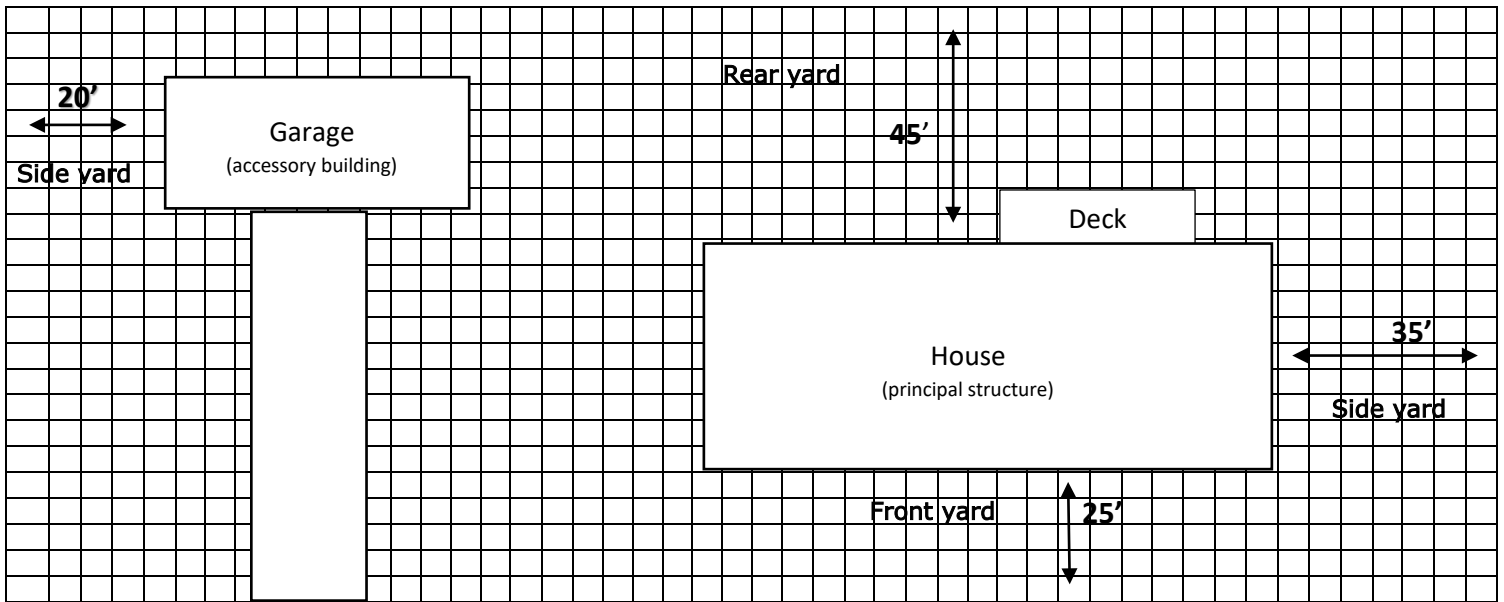
Number of Stories _____
 Use Group _____
 Construction Type _____
 No. of Occupants _____

FLOOR AREA	Existing	Alterations	New
Basement	_____	_____	_____
First & Second floor	_____	_____	_____
Third – Tenth floor	_____	_____	_____
Eleventh – Above	_____	_____	_____
TOTAL AREA	_____	_____	_____

IX. EXPIRATION OF PERMIT A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00**

X. APPLICANT SIGNATURE

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES/CHARGES APPLICABLE TO THIS APPLICATION	
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER(S) OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER(S) 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. I FURTHER CERTIFY COMPLIANCE WITH MCL 125.1510(2).	
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 Section 23a are subjected to civil fines.	
Signature of Applicant X	Date:
Signature of Owner (if required)	Date:
Contractors must show proof of State of Michigan license and register the license with the City of Adrian	



A large empty grid area for drawing the specifications for the building or structure of the proposed work.

Please draw the specifications for the building or structure of the proposed work. A site plan showing the dimension and the location of the proposed building or structure and existing buildings and/or structures on the same premises shall be shown.

- Construction shall not be started until the application has been filed with the City of Adrian building/inspection department.
- No work shall be **concealed** until it has been inspected.
- **Work started without a permit:** Any work started without obtaining a permit will be assessed a minimum \$100.00 fee.
- **All fees** shall be paid before a Certificate of Occupancy will be issued.

Apply for permits online www.adriancity.com/services/community-development/amgonlinepermittingandinspections/

XII. Buildings Regulated by the Michigan *Residential* Code

- ☐ ONE FAMILY ☐ TOWNHOUSE- NO. OF UNITS _____ ☐ DETACHED GARAGE
☐ TWO OR MORE FAMILY- NO. OF UNITS _____ ☐ ATTACHED GARAGE ☐ OTHER _____

Buildings Regulated by the Michigan *Building* Code

- | | | |
|---|---|--|
| <input type="checkbox"/> (A-1) ASSEMBLY (THEATRES, ETC.) | <input type="checkbox"/> (H-1) HIGH HAZARD (DETONATION) | <input type="checkbox"/> (M) MERCANTILE |
| <input type="checkbox"/> (A-2) ASSEMBLY (RESTAURANTS, BARS, ETC.) | <input type="checkbox"/> (H-2) HIGH HAZARD (DEFLAGRATION) | <input type="checkbox"/> (R-1) RESIDENTIAL 1 (HOTELS, MOTELS) |
| <input type="checkbox"/> (A-3) ASSEMBLY (CHURCHES, LIBRARIES, ETC.) | <input type="checkbox"/> (H-3) HIGH HAZARD (COMBUSTION) | <input type="checkbox"/> (R-2) RESIDENTIAL 2 (MULTIPLE FAMILY) |
| <input type="checkbox"/> (A-4) ASSEMBLY (INDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-4) HIGH HAZARD (HEALTH HAZARD) | <input type="checkbox"/> (R-3) RESIDENTIAL 3 (1 & 2 FAMILY) |
| <input type="checkbox"/> (A-5) ASSEMBLY (OUTDOOR SPORTS, ETC.) | <input type="checkbox"/> (H-5) HIGH HAZARD (HPM) | <input type="checkbox"/> (R-4) RESIDENTIAL 4 (ASSISTED LIVING) |
| <input type="checkbox"/> (B) BUSINESS | <input type="checkbox"/> (I-1) INSTITUTIONAL 1 (SUPERVISED) | <input type="checkbox"/> (S-1) STORAGE 1 (MODERATE HAZARD) |
| <input type="checkbox"/> (E) EDUCATION | <input type="checkbox"/> (I-2) INSTITUTIONAL 2 (HOSPITALS ETC.) | <input type="checkbox"/> (S-2) STORAGE 2 (LOW HAZARD) |
| <input type="checkbox"/> (F-1) FACTORY (MODERATE HAZARD) | <input type="checkbox"/> (I-3) INSTITUTIONAL 3 (PRISONS ETC.) | <input type="checkbox"/> (U) UTILITY (MISCELLANEOUS) |
| <input type="checkbox"/> (F-2) FACTORY (LOW HAZARD) | <input type="checkbox"/> (I-4) INSTITUTIONAL 4 (DAY CARE ETC.) | |

XIII. WILL THERE BE FIRE SUPPRESSION? ☐ NO ☐ YES → SCOPE OF WORK? _____

XIV. Type of Construction

- | | |
|---|---|
| <input type="checkbox"/> 1A - Non Combustible (Protected Structural Elements) 3HR | <input type="checkbox"/> 1B - Non Combustible (Rated Structural Elements) 2HR |
| <input type="checkbox"/> 2A - Non Combustible (Rated Structural Elements) 1HR | <input type="checkbox"/> 2B - Non Combustible (Non Rated Structural Elements) |
| <input type="checkbox"/> 3A - Non Combustibles (Exterior Walls Only) | <input type="checkbox"/> 3B - Non Combustible (Bearing Walls Rated) |
| <input type="checkbox"/> 4 - Heavy Timber | <input type="checkbox"/> 5A - Combustible (Structural Elements Rated) 1HR |
| <input type="checkbox"/> 5B - Combustible (All Elements Not Rated) | |

XV. Local Governmental Agency to Complete This Section

ENVIRONMENTAL CONTROL APPROVALS					
	Required?		Approved by:	Date:	Notes:
A – Zoning	Yes	No			
B – Fire Department	Yes	No			
C – Pollution Control	Yes	No			
D – Noise Control	Yes	No			
E – Soil Erosion	Yes	No			Lenawee County Drain Commission
F – Flood Zone	Yes	No			
G – Water Supply	Yes	No			
H – Septic System	Yes	No			
I – Variance Granted	Yes	No			
J – Other	Yes	No			

XVI. Validation –For Department Use Only

Use Group _____ Application Fee \$100 (non-refundable) _____

Type of Construction _____ Number of Inspections _____

Square feet _____ Plan Review _____

Comments: _____

Approval Signature _____

Title _____ Date _____