



City of Owosso Building Department
 301 W Main St. Owosso, MI 48867
 989-725-0535 building@ci.owosso.mi.us

**BUILDING PERMIT APPLICATION
 RESIDENTIAL**

<input type="checkbox"/> Residential renovations – interior, exterior
<input type="checkbox"/> Residential – roofing, siding, windows
<input type="checkbox"/> Residential – new residential building or additional square footage
1. Site plan or mortgage survey showing the following:
<ul style="list-style-type: none"> ➤ Property lines/easements with dimensions ➤ Setbacks-front, sides, rear property lines ➤ Existing structures, proposed structures and dimensions ➤ Dimensions of proposed new or replacement concrete ➤ Front & side elevations ➤ Grade, footings, framing, guard & handrail detail ➤ Plan (top view) with dimensions ➤ MDEQ floodplain permit is required for all work in a flood zone prior to application ➤ Soil erosion permit (from Shiawassee County) required

Property owner:	Property address:
Phone number:	Email:
Applicant name (if different from property owner):	
Company name:	
Address:	
Phone number:	
Property owner or Applicant signature:	Date:

PLEASE CHECK ALL THAT APPLY			
<input type="checkbox"/> House new	<input type="checkbox"/> House addition	<input type="checkbox"/> Housing renovation	<input type="checkbox"/> Renovations exterior
<input type="checkbox"/> Renovations interior	<input type="checkbox"/> Deck	<input type="checkbox"/> Garage, attached	<input type="checkbox"/> Garage, detached (over 200 sq. ft.)
<input type="checkbox"/> Porch/cap/steps	<input type="checkbox"/> Ramp	<input type="checkbox"/> Roof	<input type="checkbox"/> Siding
<input type="checkbox"/> Waterproofing (basement)	<input type="checkbox"/> Windows	<input type="checkbox"/> Other	

DIMENSIONAL INFORMATION		
1 st floor sq. ft.=	2 nd floor sq. ft.=	Basement sq. ft.=
House width=	House length=	House height=
Lot sq. ft.=	<input type="checkbox"/> Single family	<input type="checkbox"/> Duplex
Garage, attached width=	Garage, attached length=	Garage, attached height=
Garage, attached sq. ft.=	Garage, detached width=	Garage, detached length=
Garage, detached height=	Garage, detached sq. ft.=	

Detailed description of all proposed work:

Construction Value \$

Architect/Engineer that sealed plans (if applicable) Are you the permit applicant? YES NO	
Name:	Company Name:
Address:	
Phone Number:	Cell:
E-mail:	
License number:	Expiration date:
Signature:	Date:

Homeowner permit authorization: I am the owner of this property and I have given the applicant permission to perform the work described in this application.	
Name:	
Address:	
Phone Number:	Cell:
Signature:	Date:

Contractor Information–Are you the permit applicant? YES NO (include copy of state license & ID-no fee)	
Name:	Company Name:
Address:	
Phone Number:	Cell:
E-mail:	
License number:	Expiration date:
Signature:	Date:

- Building work shall not be started until the application for permit has been filed with the city of Owosso. All work shall be in conformance with the Michigan Building Code
- No work shall be concealed until it has been inspected**
- Applicant certifies that all information given is correct
- Applicant shall be responsible for the scheduling of inspections
- HOMEOWNER – I hereby certify the building work described on this application shall be installed by myself in my own single-family dwelling in which I am living or about to occupy
- 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 6 months after issuance of the permit or if the authorized work is suspended or abandoned for a period of 6 months 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.**
- 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.
- Separate electrical, mechanical and/or plumbing permits may be required to complete your project
- Effective October 1, 2020 - Bureau of Construction Codes (BCC) will begin implementing its authority to

issue citations in accordance with MCL 339.553 and MCL 339.5537 to maintain compliance with the Occupational Code, 1980 PA 299, and the Skilled Trades Regulation Act, 2016 PA 407. Individuals licensed/registered as building officials, inspectors, plan reviewers, residential builders, maintenance & alteration contractors, electricians, plumbers, mechanical contractors, and boiler tradesmen may be subject to a citation being issued.

- List of violations:
 - Lack of Identification: No proof of licensure and government-issued photo identification
 - No Permit Status: No documentation of permit where required before work commences
 - Unregistered Apprentice: Non-licensed individual on worksite assisting with electrical or plumbing work
 - Operation of a Boiler Without a Valid Certificate: Boiler found operating with a certificate blocking violation and existing code deficiencies that are not corrected

Fee Schedule		
▪ Base fee on all permits (non-refundable)	\$30	
▪ Inspections on all permits	\$75 each	
Construction Value:	Permit Fee:	
▪ Up to \$1,000	\$105 (includes base fee and 1 inspection)	
▪ \$1,001 to \$2,000	\$145 (includes base fee and 1 inspection)	
▪ \$2,000 to \$50,000	\$60 plus \$10 per \$1,000 over \$2,000	
▪ \$50,000 to \$500,000	\$540 plus \$10 per \$1,000 over \$50,000	
▪ \$500,000 and above	\$5,000 plus \$6.00 per \$1,000 over \$500,000	
▪ Roofing up to \$5,000	\$80	
▪ Roofing \$5,000 to \$10,000	\$110	
▪ Roofing over \$10,000	follow above construction values/fees	
▪ Siding	\$80	
▪ Windows	\$80	
▪ Plan review fees	55% of building permit fee	
CONTACT THE BUILDING DEPARTMENT FOR FURTHER FEE SCHEDULE INFORMATION		
FOR OFFICE USE ONLY		
Date submitted:	Staff Initials:	Permit number:
PLAN REVIEWER/BUILDING OFFICIAL		
Survey/required drawings submitted:		
Signed contract submitted:		
Additional comments:		
Building Official signature:		
Date:		