



## *City of Bloomfield Hills*

*45 E. Long Lake Road*

*Bloomfield Hills, Michigan 48304-2322*

*Phone (248) 644-1520 Fax (248)644-4813*

*www.bloomfieldhillsmi.net*

## **BUILDING DEPARTMENT REQUIREMENTS FOR NEW CONSTRUCTION, ADDITONS AND RENOVATIONS**

### **NEW CONSTRUCTION**

- 3 SETS OF FOLDED PLANS (INCLUDING GRADING PLANS)  
All plans submitted for approval shall show square footage per floor, including lower level & garages, as computed by plan author. Complete structural plans are required at time of submittal.
- SUFFICIENT INFORMATION TO SHOW COMPLIANCE WITH THE MICHIGAN ENERGY CODE (MUEC 2009)
- COMPLETE APPLICATION WITH COPY OF BUILDER'S & DRIVER'S LICENSES

### **ADDITIONS**

- 3 SETS OF FOLDED PLANS (WITH SITE PLAN THAT DEPICTS EXISTING AND PROPOSED GRADES AT ALL NEW CORNERS AND INTERSECTIONS WITH THE EXISTING STRUCTURE)
- 3 ADDITIONAL SETS OF GRADING PLANS (If the addition is greater than 600 square feet in size at grade level). Refer to the Grading Plan Checklist on our web site for plan requirements.
- COMPLETED APPLICATION WITH COPY OF BUILDER'S & DRIVER'S LICENSES

### **INTERIOR RENOVATIONS**

- 1 SET OF FOLDED PLANS
- COMPLETED APPLICATION WITH BUILDER'S & DRIVER'S LICENSES

\*\*\*ALL APPLICABLE FEES (APPLICATION, REVIEW AND REGISTRATION) MUST BE PAID AT THE TIME OF SUBMISSION. PLEASE REFER TO THE FEE SCHEDULE\*\*\*

### **COMPLETE PACKETS ARE REQUIRED AT TIME OF SUBMISSION. PARTIAL SUBMISSIONS WILL NOT BE ACCEPTED**

As of November 2003, Oakland County Drain Commission requires that a sedimentation control permit be obtained before any building permit is issued. It is beneficial that you make application as soon as possible, so that we may have it in the office when your building permit is ready.

The permit is obtained from: Oakland County Drain Commission

Soil Erosion Unit

Building #95 West

One Public Works Drive

Waterford, MI 48328-1907

Telephone # 248-858-5389



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### BUILDING PERMIT AND PLAN REVIEW APPLICATION

**\*\*\*A copy of your builder's and driver's license  
ARE required with every application submitted.\*\*\***

AUTHORITY: 1972 PA 230  
COMPLETION: MANDATORY TO OBTAIN PERMIT  
PENALTY: PERMIT WILL NOT BE ISSUED

**Applicant to complete all items in Sections I, II, III, IV, V, VI & VII**

**Note: Separate Applications Must Be Completed for Plumbing, Mechanical, and Electrical Work Permits**

<b>I. PROJECT INFORMATION</b>			
PROJECT NAME		ADDRESS	
CITY			ZIP CODE
<b>II. IDENTIFICATION</b>			
<b>A. OWNER OR LESSEE</b>			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ( )
<b>B. ARCHITECT OR ENGINEER</b>			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ( )
LICENSE NUMBER			EXPIRATION DATE
<b>C. LICENSEE</b>			
NAME		ADDRESS	
QUALIFYING OFFICER (IF CORPORATION):			
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ( )
CELL NUMBER ( )	E-MAIL ADDRESS		FAX NUMBER ( )
BUILDER'S LICENSE NUMBER:	EXPIRATION DATE:		
QUALIFYING OFFICER LICENSE NUMBER:			
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION:			
REGISTERED AGENT NAME FOR CORPORATION OR LLC:			
REGISTERED AGENT ADDRESS IF DIFFERENT FROM LICENSEE:			

WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION				
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION				
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>				
<b>A. TYPE OF IMPROVEMENT</b>				
<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> ALTERATION		
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR		
<b>B. REVIEW(S) TO BE PERFORMED (please circle)</b>				
BUILDING	ELECTRICAL	MECHANICAL	PLUMBING	
<b>IV. PROPOSED USE OF BUILDING</b>				
<b>A. RESIDENTIAL</b>				
<input type="checkbox"/> ONE FAMILY	<input type="checkbox"/> DETACHED GARAGE	<input type="checkbox"/> OTHER _____		
<input type="checkbox"/> TWO OR MORE FAMILY # OF UNITS _____	<input type="checkbox"/> ATTACHED GARAGE			
DESCRIBE IN DETAIL PROPOSED USE OF BUILDING AND/OR WORK TO BE DONE. IF USE OF EXISTING BUILDING IS BEING CHANGED, ENTER PROPOSED USE.				
_____				
_____				
<b>V. SELECTED CHARACTERISTICS OF BUILDING</b>				
<b>A. PRINCIPAL TYPE OF FRAME</b>				
<input type="checkbox"/> MASONRY, WALL BEARING	<input type="checkbox"/> WOOD FRAME	<input type="checkbox"/> STRUCTURAL STEEL	<input type="checkbox"/> REINFORCED CONCRETE	<input type="checkbox"/> OTHER
<b>B. PRINCIPAL TYPE OF HEATING FUEL</b>				
<input type="checkbox"/> GAS	<input type="checkbox"/> OIL	<input type="checkbox"/> ELECTRICITY	<input type="checkbox"/> COAL	<input type="checkbox"/> OTHER
<b>C. TYPE OF SEWAGE DISPOSAL</b>				
<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY		<input type="checkbox"/> SEPTIC SYSTEM		
<b>D. TYPE OF WATER SUPPLY</b>				
<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY		<input type="checkbox"/> PRIVATE WELL OR CISTERN		
<b>E. TYPE OF MECHANICAL</b>				
WILL THERE BE AIR CONDITIONING? <input type="checkbox"/> YES <input type="checkbox"/> NO		WILL THERE BE FIRE SUPPRESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>F. DIMENSIONS/DATA</b>				
NUMBER OF STORIES _____	FLOOR AREA: <u>EXISTING</u>	<u>ALTERATIONS</u>	<u>NEW</u>	
USE GROUP _____	LOWER LEVEL _____	_____	_____	
CONST. TYPE _____	1 <sup>ST</sup> & 2 <sup>ND</sup> Floor _____	_____	_____	
# OF OCCUPANTS _____	3 <sup>RD</sup> - 10 <sup>TH</sup> Floor _____	_____	_____	
COST OF CONSTRUCTION _____	11 <sup>TH</sup> -ABOVE _____	_____	_____	
	TOTAL AREA _____	_____	_____	
<b>G. NUMBER OF OFF STREET PARKING SPACES (Commercial)</b>				
ENCLOSED _____		OUTDOORS _____		

<b>VI. APPLICANT INFORMATION</b>			
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.			
NAME _____		TELEPHONE NUMBER (    ) _____	
ADDRESS _____	CITY _____	STATE _____	ZIP CODE _____
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER _____			
APPLICATION AND PLAN REVIEW FEE ENCLOSED: \$ _____			
As the owner of record, I hereby authorize the proposed construction noted on this application.			
Print Name _____		Signature _____	Date _____
<b>HOMEOWNER AFFIDAVIT</b>			
I hereby certify the work described on this permit application shall be completed <b>by myself in my own home</b> in which I am living or about to occupy. All work shall be completed and/or installed in accordance with the State Building Code and <b>shall not be</b> put into use until it has been <b>inspected</b> and <b>approved</b> by the Building Inspector. I will cooperate with the Building Inspector and assume the responsibility to arrange for necessary inspections.			
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 residential building or a residential building or residential structure. Violators of Section 23a are subjected to civil fines.			
<b>VII. APPLICANT'S SIGNATURE</b>			
<b>(Applicant acknowledges that information on this application is subject to verification by our code enforcement officer)</b>			
<b>SIGNATURE</b> (Homeowner signature indicates compliance with Homeowner Affidavit) _____		<b>DATE:</b> _____	
<b>VIII. VALIDATION – FOR DEPARTMENT USE ONLY</b>			
USE GROUP _____	BASE FEE _____		
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____		
SQUARE FEET _____			
APPROVAL SIGNATURE _____			
<b>BUILDING OFFICIAL</b> _____		DATE _____	