



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
ADDITIONS UNDER 600 SQUARE FEET ON THE GROUND LEVEL**

**ADDITIONS UNDER 600 SQUARE FEET ON THE GROUND LEVEL. MAY POSSIBLY
INCLUDE ADDITIONAL INTERIOR ALTERATIONS.**

- 3 SETS OF **FOLDED** ARCHITECTURAL/STRUCTURAL PLANS
- **INCLUDE A SITE PLAN** THAT DEPICTS EXISTING AND PROPOSED GRADES AT ALL NEW CORNERS AND INTERSECTIONS WITH THE O:\Building Dept\Permit Applications & Fees\Additions Under 600 s.f. on ground floor.docO:\Building Dept\Permit Applications & Fees\Additions Under 600 s.f. on ground floor.docEXISTING STRUCTURE)
- **COMPLETED APPLICATION WITH COPY OF BUILDER'S & DRIVER'S LICENSES**

NOTE: The property owner of record MUST sign this application as shown on page 4. In lieu thereof, you may submit a copy of your signed contract with the property owner.

*****ALL APPLICABLE FEES (APPLICATION, PLAN REVIEW AND REGISTRATION) MUST BE PAID AT THE TIME OF SUBMISSION. (IF THIS APPLICATION IS SUBMITTED AS A RESULT OF AN INVESTIGATIVE ACTION FOR WORKING WITHOUT A PERMIT, THEN THE INVESTIGATION FEE IS ALSO REQUIRED AT TIME OF APPLICATION.) PLEASE REFER TO THE PUBLISHED FEE SCHEDULE ON OUR WEB PAGES*****

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

A sedimentation control permit is required for single family home construction and many larger addition projects. Verify this requirement with the OCDC. This permit (or verification of a permit not being required) MUST be submitted prior to issuance of a building permit. **COMPLETE "H" ON PAGE 4.**

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 APPLICATION FOR ALTERATIONS WITH ADDITION UNDER 600 SQUARE FEET ON GROUND FLOOR

*****Copies of your builder's and driver's licenses
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

I. PROJECT INFORMATION			
PROJECT NAME		ADDRESS	
CITY			ZIP CODE
II. IDENTIFICATION			
A. PROPERTY OWNER OF RECORD			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ()
B. ARCHITECT, ENGINEER OR PLAN DESIGNER			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER ()
LICENSE NUMBER			EXPIRATION DATE
C. LICENSEE			
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 (PROVIDE COPY OF CERTIFICATE WITH FIRST ANNUAL REGISTRATION)

MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION (PROVIDE COPY OF CERTIFICATE WITH FIRST ANNUAL REGISTRATION)

LIABILITY INSURANCE CARRIER: (PROVIDE COPY OF CERTIFICATE WITH FIRST ANNUAL REGISTRATION)

III. TYPE OF IMPROVEMENT AND PLAN REVIEW

A. TYPE OF IMPROVEMENT

<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. REVIEW(S) TO BE PERFORMED (please circle)

BUILDING	ELECTRICAL	MECHANICAL	PLUMBING
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IV. PROPOSED USE OF BUILDING

A. RESIDENTIAL

<input type="checkbox"/> ONE FAMILY	<input type="checkbox"/> DETACHED GARAGE	<input type="checkbox"/> OTHER ACCESSORY _____
<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.

V. SELECTED CHARACTERISTICS OF BUILDING

A. PRINCIPAL TYPE OF FRAME

<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
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B. PRINCIPAL TYPE OF HEATING FUEL

<input type="checkbox"/> GAS	<input type="checkbox"/> OIL	<input type="checkbox"/> ELECTRICITY	<input type="checkbox"/> COAL	<input type="checkbox"/> OTHER
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C. TYPE OF SEWAGE DISPOSAL

<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY	<input type="checkbox"/> SEPTIC SYSTEM
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D. TYPE OF WATER SUPPLY

<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY	<input type="checkbox"/> PRIVATE WELL
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E. TYPE OF MECHANICAL

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
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F. DIMENSIONS/DATA

NUMBER OF STORIES _____	FLOOR AREA: <u>EXISTING</u> _____	<u>ALTERATIONS</u> _____	<u>ADDITIONS</u> _____
USE GROUP _____	LOWER LEVEL _____	_____	_____
CONST. TYPE _____	1 ST & 2 ND Floor _____	_____	_____
# OF OCCUPANTS _____	3 RD FLOOR _____	_____	_____
COST OF CONSTRUCTION _____	OTHER: _____	_____	_____
	TOTAL AREA _____	_____	_____

G. MUEC Compliance (Check one): Not Required in Scope of Project Part IX Completed

H. Sedimentation Control Permit (check one): ___Not required ___Applied, delayed submittal ___Included, attached

VI. APPLICANT INFORMATION

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 property owner of record, I hereby authorize the proposed construction noted on this application.

Print Name _____ Signature _____ Date _____

HOMEOWNER AFFIDAVIT (in lieu of application by a licensed contractor).

I hereby certify the work described on this permit application shall be completed **by myself in my own home** 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 **shall not be** put into use until it has been **inspected** and **approved** 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.

VII. APPLICANT'S SIGNATURE

(Applicant acknowledges that information on this application is subject to verification by our code enforcement officer)

SIGNATURE (Homeowner signature indicates compliance with Homeowner Affidavit)	DATE:
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VIII. VALIDATION – FOR DEPARTMENT USE ONLY

USE GROUP _____	BASE FEE _____
TYPE OF CONSTRUCTION _____	NUMBER OF INSPECTIONS _____
SQUARE FEET _____	

APPROVAL SIGNATURE

LARRY ROSPIERSKI, BUILDING OFFICIAL

DATE

Part IX- MUEC compliance Statement

In addition to the mandatory requirements, the energy code requires you to choose one of the three alternative compliance paths to demonstrate code compliance. Indicate the path you choose below by **checking one of the following boxes and completing the instructions.**

- Prescriptive (as prescribed by the code)

If you choose to use the prescriptive method of compliance, you may demonstrate compliance by completing the attached Prescriptive Compliance Report Form. **Sign the compliance statement below.**

- Total UA Alternative (trade-off method)

Compliance with the Total UA Alternative method may be demonstrated by completing a compliance report using Rescheck software provided free of charge at energycodes.gov. **Sign the compliance statement below and attach a copy of the completed compliance report with this form when submitting for a building permit.**

Please note that the building plans shall show the same materials and methods you use to complete the REScheck form. For example, if you use basement wall insulation in REScheck, such insulation should be clearly indicated on the building plans as well.

- Simulated Performance Alternative (performance analysis)

Certain commercially available compliance software (e.g. REM/RATE, etc.) may be used to demonstrate that the proposed construction will have an annual energy cost that is less than or equal to the energy cost of the standard reference design. Please see Section 405 of the code for specific criteria. Such software shall generate a compliance report that documents that the proposed design complies and shall include information outlined in Section 405.4.2. **Sign the compliance statement below and attach a copy of the completed compliance report with this form when submitting for a building permit.**

Compliance Statement

I have read and completed the Energy Code Compliance Worksheet and will insure that the actual construction of this project complies with the Michigan Energy Code as adopted.

Applicant	Signature	Date
Address	Printed Name	

Prescriptive Compliance Report Form

(Please note that this form is only required if you have chosen the prescriptive compliance path.)

In the table below, indicate the proposed values of insulation, fenestration and other components in your proposed home. Please note that such components shall meet or exceed the performance of the prescribed values. If you have any clarifications, please note them in the comment section. Finally, the building plans shall show the same materials and methods you use to complete this form.

Component Description	Prescribed Value	Proposed Value	Comment
Fenestration U-Factor	0.35		
Skylight U- Factor (a)	0.60		
Ceiling R-Value	38		
Wood Frame R Value	20 or 13+5 (b)		
Mass Wall R-Value ©	13/17		
Floor R-Value	30 (d)		
Basement Wall R-Value (e)	10/13		
Slab R-Value & Depth (f)	10,2 feet		
Crawl space Wall R-Value	10/13		
Attic supply ducts R-Value	8		
Other supply ducts R-Value	6		
High efficacy lamps in permanently installed light fixtures-percentage	50%		

Attic access doors shall be weather-stripped and insulated to level of ceiling insulation. A wood frame or equivalent retainer is required around the access when loose fill insulation is used.

- (a) The fenestration U-factor excludes skylights
- (b) 13+5 means R-13 cavity insulation plus R-5 insulated sheathing. If structural covers 25% or less of the exterior, R-5 sheathing is not required where structural sheathing is used. If structural sheathing covers more than 25% of exterior, structural sheathing shall be supplemented with insulated sheathing of at least R-2.
- (c) The second R-value applies when more than half the insulation is on the interior.
- (d) Or insulation sufficient to fill the framing cavity, R-19 minimum.
- (e) The first R-value applies to continuous insulation, the second to framing cavity insulation, either insulation meets the requirement.
- (f) R-5 shall be added to the required slab edge R-values for heated slabs.

This form is intended to provide a simple means to document prescriptive code compliance. Please see the full code context for exceptions, alternatives and other requirements that apply.