



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

**RENOVATION – RESIDENTIAL
BUILDING PERMIT & PLAN REVIEW APPLICATION**

The following are required for submittal:

I. Documents

- Completed Building Permit & Plan Review Application
- Completed Construction Schedule (Attached to Application)
- Copy of Contractor's License and photo I.D.

II. Building plans

- (1) complete set of electronic building plans emailed to building@bloomfieldhillsmi.net

Plan Notes:

- All plans shall include square footage per floor, including lower level and garages, as calculated by the plan author. Complete structural plans are required at the time of submittal for New Construction permits.
- Signed and sealed plans are required for all projects where the primary structure usable square footage (including existing) is 3500 square feet or more.

III. Fees (Cash or Check made payable to City of Bloomfield Hills, Credit Card payments accepted, access fees apply)

- Application fee - \$100
- Plan review deposit - \$100 (balance due upon permit issuance)
- Escrow - \$5,000

IV. Submit all applications, plans and checklists electronically to building@bloomfieldhillsmi.net

V. Estimated Date of Project Completion _____



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**BUILDING PERMIT AND PLAN
REVIEW APPLICATION
RENOVATION – RESIDENTIAL**

I. PROJECT INFORMATION ADDRESS and PROPERTY ZONING DISTRICT			
II. IDENTIFICATION			
A. OWNER			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	CELL NUMBER
EMAIL ADDRESS			
B. ARCHITECT OR ENGINEER			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	CELL NUMBER
EMAIL ADDRESS			
LICENSE NUMBER		EXPIRATION DATE	
C. CONTRACTOR			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	
EMAIL ADDRESS			
OFFICE NUMBER	CELL NUMBER		FAX NUMBER
FEDERAL EMPLOYER ID NUMBER		REGISTERED AGENT NAME IF DIFFERENT THAN LICENSEE	
WORKERS COMP INSURANCE CARRIER		MESC EMPLOYER NUMBER	

DESCRIBE PROPOSED WORK:

TYPE OF FRAME:

MASONRY, WALL BEARING WOOD FRAME STRUCTURAL STEEL REINFORCED CONCRETE OTHER

TYPE OF HEATING:

GAS OIL ELECTRICITY COAL OTHER

TYPE OF SEWAGE DISPOSAL:

PUBLIC OR PRIVATE COMPANY SEPTIC SYSTEM PUBLIC OR PRIVATE COMPANY PRIVATE WELL OR CISTERN

WILL THERE BE AIR CONDITIONING? YES NO**TYPE OF WATER SUPPLY:**WILL THERE BE FIRE SUPPRESSION? YES NO**DIMENSIONS/DATA**

NUMBER OF STORIES _____

USE GROUP _____

CONST. TYPE _____

OF OCCUPANTS _____

TOTAL COST OF CONSTRUCTION FOR PROJECT _____

EXISTING SQ. FT.ALTERATION SQ. FT.NEW SQ. FT.

TOTAL AREA _____

IV. APPLICANT INFORMATION

I certify the use of this property as proposed with this building permit application is compliant with the permitted zoning uses for this property and zoning district under the Bloomfield Hills City Code.

Signature of Applicant / Contractor _____ Date _____

Printed Name _____

AS THE OWNER OF RECORD, I HEREBY AUTHORIZE THE PROPOSED CONSTRUCTION NOTED ON THIS APPLICATION.

Signature of Property Owner _____ Date _____

Printed Name _____

V. HOMEOWNER AFFIDAVIT (Sign only if permit is applied for by the homeowner)

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.

Signature of Homeowner _____

Printed Name _____ Date _____