

CITY OF ROMULUS

PLAN REVIEW NO: _____

Department of Building & Safety
12600 S. Wayne
Romulus MI 48174
734-942-7550
www.romulusgov.com

PERMIT NO: _____

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

All areas must be completed on the application below:

JOB LOCATION: _____	Date: _____
All permit requests must have an address to be processed	
_____	_____
Property I.D. Number	Zoning

<input type="checkbox"/> Old Bldg <input type="checkbox"/> New Bldg	Contractor Information:		
<input type="checkbox"/> New Replacement	Contractor's Name _____		License No. _____
<input type="checkbox"/> Approved by Homeowners Association <input type="checkbox"/> Not Applicable	Address _____	City _____	State _____ Zip Code _____
	Telephone Number _____	Email Address _____	Federal I.D. Number _____
	Worker's Compensation Carrier _____		MESC Employer Number _____

Architectural/Designer/Engineer Information:			
Company and Name _____	State License No. _____	Telephone Number _____	Email Address _____
Address _____	City _____	State _____	Zip Code _____

Owner of Property Information:			
Name _____	Telephone Number _____	Email Address _____	
Address _____	City _____	State _____	Zip Code _____

Occupancy/Tenant Information (if not owner):			
Occupant's Name _____	Telephone Number _____	Email Address _____	
Occupant's Address _____	City _____	State _____	Zip Code _____

Ownership	Structural Frame	Applicable Code	Use Group(s)		
<input type="checkbox"/> Private (Individual, Corporation, Nonprofit Institution, Etc.)	<input type="checkbox"/> Steel	<input type="checkbox"/> 2015 Michigan Building Code	<input type="checkbox"/> A-1	<input type="checkbox"/> H-2	<input type="checkbox"/> R-2
<input type="checkbox"/> Public (Federal, State, County or Local Government)	<input type="checkbox"/> Masonry	<input type="checkbox"/> 2015 Michigan Residential Code	<input type="checkbox"/> A-2	<input type="checkbox"/> H-3	<input type="checkbox"/> R-3
	<input type="checkbox"/> Concrete		<input type="checkbox"/> A-3	<input type="checkbox"/> H-4	<input type="checkbox"/> R-4
	<input type="checkbox"/> Wood		<input type="checkbox"/> A-4	<input type="checkbox"/> H-5	<input type="checkbox"/> S-1
	Other: specify... _____	Proposed Construction Type as per Michigan Code	<input type="checkbox"/> A-5	<input type="checkbox"/> I-1	<input type="checkbox"/> S-2
Improvement Type	_____	_____	<input type="checkbox"/> B	<input type="checkbox"/> I-2	<input type="checkbox"/> U
<input type="checkbox"/> New Construction	_____	_____	<input type="checkbox"/> E	<input type="checkbox"/> I-3	<input type="checkbox"/> Other-
<input type="checkbox"/> Addition	_____	_____	<input type="checkbox"/> F-1	<input type="checkbox"/> I-4	Specify
<input type="checkbox"/> Alteration	_____	_____	<input type="checkbox"/> F-2	<input type="checkbox"/> M	
<input type="checkbox"/> Repair/Replacement	_____	_____	<input type="checkbox"/> H-1	<input type="checkbox"/> R-1	
<input type="checkbox"/> Relocation	_____	_____			
<input type="checkbox"/> Foundation	_____	_____			

Section 23a of the State Construction 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. I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

Signature of Applicant _____	Address _____	Telephone No. _____
Responsible person & title of person in charge of work _____		Telephone No. _____

Applicant must complete all pertinent items regarding their project

Street Frontage (feet)	Stories (number)	Lot Area (sq. feet)
Front Setback (feet)	Bedrooms (number)	Building Area (sq. feet)
Rear Setback (feet)	Full Baths (number)	Living Area (sq. feet)
Left Setback (feet)	Partial Baths (number)	Basement Area (sq. feet)
Right Setback (feet)	Garages (number)	Garage Area (sq. feet)
Height Above Grade (feet)	Windows (number)	Office/Sales (sq. feet)
New Residential Units (number)	Fireplaces (number)	Service (sq. feet)
Existing Residential Units (number)	Enclosed Parking (number)	Manufacturing (sq. feet)
Elevators/Escalators (number)	Outside Parking (number)	Parking Area (sq. feet)

The following items must be submitted:

Residential

New single family residences: four (4) sealed site grade plans as per site drainage requirements sheet; three (3) complete prints shall include the highlighted information below.

Residential additions/alterations: three (3) complete prints, which shall include the highlighted information below.

All residential drawings shall include: electrical (if ampacity of more than 400 amperes for the service or feeder and if the floor area is more than 3,500 sq. ft. or may be required for projects of an unusual design), **mechanical & plumbing detail; elevations; floor plan; wall section; foundation plan; truss/roof design; door/window schedules**

Commercial /Industrial

Five (5) sealed and signed construction documents for new construction and additions/alterations. Note: Soil Erosion & Sedimentation Control Permit application shall be made to Wayne County Department of Environment-734-326-3936.

Airport Projects

Three (3) full size & one (1) half size sealed and signed construction documents; one (1) specification book if applicable.

Notes

- An original application must be submitted.
- All submittals must include a street address. Address requests are available at the City of Romulus Tax Assessor' Office.
- A copy of the permittee's State of Michigan Photo I.D./ Driver License is required.
- A copy of the licensee's State of Michigan Builders License is required for residential construction (Registration Fee - \$26.00).
- A licensed contractor may authorize another person to submit for and secure permit in his/her behalf; the authorized person must have an original, notarized letter stating that they are permitted to do so and is his/her acting agent.
- Separate applications are required for demolitions and signage.
- Failure to execute a permit within six (6) months of application approval by the Dept. of Building & Safety may result in the disposal of plans without notification to the applicant.

The applicant is required to complete the following items for new construction:

- Soil bearing capacity: The soil bearing used for this design is _____ PSF. This value is ___ Presumed ___ Verified.
- Building Systems: Please check appropriate items: ___complete sprinkler, ___partial sprinkler, ___fire alarm, ___emergency power, ___complete detection system, ___partial detection system. For partial systems, show area protected on plans or by letter.
- Mechanical information: Total output rating of each heating unit is _____ BTU. Number of Units: _____.
Refrigeration: Full Partial None. Number of units to be installed _____.
Primary fuel source is: Gas Oil Electric L.P. Coal Wood Solar

Plan Review Fee Schedule:

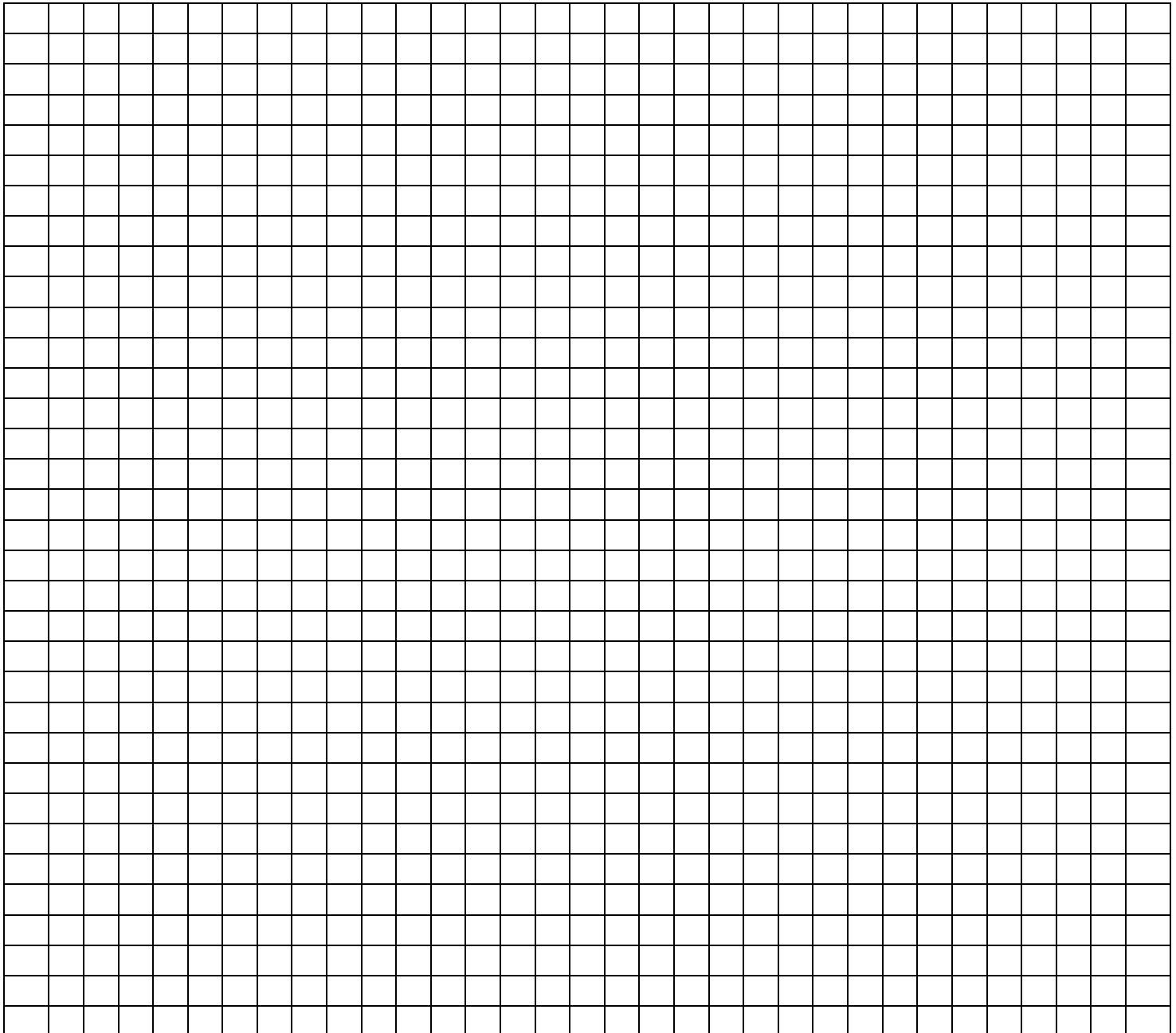
First 3,000,000 of construction cost x .0013, remainder of construction cost x .0005 (minimum fee \$100.00)	
Electrical Plan Review:	25% of building plan review fee (min. fee is \$35.00)
Mechanical Plan Review:	25% of building plan review fee (min. fee is \$35.00)
Plumbing Plan Review:	25% of building plan review fee (min. fee is \$35.00)
Fire Dept. Plan Review:	25% of building plan review fee (min. fee is \$35.00)
Site Grade Review (residential construction only):	\$135.00 (residential construction only)
Outside Utility Fee:	(if applicable - reference "How to Obtain a Commercial/Industrial Building Permit Guide Sheet)

Plan Review Fees:

Building Rev	\$ _____
Electrical Rev	\$ _____
Mechanical Rev	\$ _____
Plumbing Rev	\$ _____
Fire Dept Rev	\$ _____
Site Grade Rev	\$ _____
Outside Utility Review Fee	\$ _____
Total Review Fee Due	\$ _____

Description of work and proposed use:		
Sq. ft. of Improvement (required to determine Fire Dept. Inspection Fees)		_____ Sq. ft.
Estimated Start Date / /	Estimated Completion Date / /	Construction Cost \$

PLOT PLAN
(show lot lines, easements, setbacks and dimensions)



PUBLIC RECORDS: this plan and related documents may be subject to public inspection and copying

DEPARTMENT USE ONLY

Zoning Plan Review

Lot Area _____ Lot Coverage(%) _____

Zoning District _____

Planning Commission Approval ___ Yes ___ No Planning Commission Number _____

Board of Zoning Appeals ___ Yes ___ No Board of Zoning Appeals Number _____

Variance Information: _____

Plan Review Transmittals	#1 Date	Initials	#2 Date	Initials	#3 Date	Initials	#4 Date	Initials
Engineering								
Planning								
Dept. of Public Works								
Fire Department								
Health Department								

Remarks _____

DPW Approval

 Authorized Signature Date _____

	Date Issued	Permit Number	Permit Fee
BUILDING PERMIT			\$
FOUNDATION ONLY PERMIT			\$
STRUCTURAL PERMIT ONLY			\$
OTHER			\$

Approved by _____ Date _____

Remarks _____

