

**Permit Application Checklist  
(return with application)**

Vevay Township staff perform Building and Zoning Inspections.  
Office hours are Monday through Friday  
From 10am to 4pm

Please call in all inspection requests to Vevay Township Office at 517-676-9523  
before 3:30p.m. on the day before the inspection is needed.

Permit Application Address \_\_\_\_\_

Owner's Name \_\_\_\_\_

Contractor's Name \_\_\_\_\_

BEFORE A PERMIT MAY BE ISSUED all of the following documentation must be submitted or justified as non-applicable. PLEASE INDICATE BY CHECK MARK that each item has been enclosed with the application.

- ☐ 1. Zoning Permit Application - *Required for ALL applications.*
- ☐ 2. Building Permit Application & Lot Diagram - *Required for ALL applications.*  
The Lot Diagram is located on back of the first page of the Building Permit Application.
- ☐ 3. Building Plans or Drawings are required for ALL applications. Two (2) complete sets are required with permit. To include wall section, foundation plan, and floor plan. In addition, if digital available please send to [secretary@vevaytownship.org](mailto:secretary@vevaytownship.org)
- ☐ 4. House Number/Address is required for all residences. Township Supervisor and Assessor will assist in creating new address.
- ☐ 5. Michigan Uniform Energy Code Compliance. For all site-built new construction; documentation must be provided demonstrating compliance with the energy code.
- ☐ 6. Proof of Ownership. NEW RESIDENTIAL & NEW COMMERCIAL ONLY.  
Provide copy of deed or land contract agreement.
- ☐ 7. Property Tax ID Number.
- ☐ 8. Sanitation/Water Supply Permits. Ingham Co. Environmental Health: 517-887-4312.
- ☐ 9. Driveway/Sidewalk Permit. Ingham County Road Commission: 517-676-9722.
- ☐ 10. Soil Erosion Permit/Waiver Letter. Ingham County Drain Commission 517-676-8395  
Waiver on-line at [www.inghamdrains.org](http://www.inghamdrains.org)
- ☐ 12. DNR Approval. ONLY IF property is located in wetlands or a flood plain.  
BUILDING PERMIT CANNOT BE ISSUED WITHOUT DNR APPROVAL.  
DNR: 517-243-5002.

\_\_\_\_\_ 13. Mechanical, Electrical and Plumbing Permits eventually necessary.

Separate application forms for these permits are necessary prior to commencing work on that portion of the project. State of Michigan: 517-241-9313.

**Responsibilities of Applicants**

It is the legal responsibility of the applicant to call for all required inspections before any electrical, plumbing, mechanical, or structural work is concealed or covered.

It is also the applicant's responsibility to obtain and submit separate applications for any plumbing, electrical, mechanical or structural building permits.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Dated

Building plans and drawings must contain sufficient detail to perform a plan review for conformance with the State Building Code. Include wall section/cross-section drawing showing material dimensions and specifications from footing to rafters, as well as floor plan indicating all room dimensions, window, door and stair openings. All structures that contain pre-manufactured members (roof trusses, floor trusses, etc.) require sealed diagrams from the manufacturer and forwarded to our office at time of delivery.

**NO PERMIT IS REQUIRED FOR:**

**RESHINGLING:** Provided two layers or less, and no roof boards or rafters are being replaced, or any change in shape.

**RESIDING:** No physical change other than the siding.

**WINDOW REPLACEMENT:** Same size not requiring new headers.

**SHEDS:** 200 square feet or smaller do not require a building permit, **BUT DO REQUIRE ZONING APPROVAL.**

Please call the Vevay Township Office at 517-676-9523  
should you require further assistance in completing applications.

VEVAY TOWNSHIP

780 EDEN ROAD

MASON, MI 48854

517-676-9523

FAX: 517-676-6655

Revised 5-2018

Vevay Township  
780 Eden Rd  
Mason MI 48854  
517-676-9523

## BUILDING PERMIT

PERMIT NO. \_\_\_\_\_  
Accessory/detached structures and demolition

Job Address: \_\_\_\_\_

Property tax I.D. No.: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Permit Determinant: \_\_\_\_\_

Type Const.: \_\_\_\_\_

Email: \_\_\_\_\_

Basic Dimensions: \_\_\_\_\_ ft. x \_\_\_\_\_ ft.

Owner: \_\_\_\_\_ ( ) \_\_\_\_\_

Address: \_\_\_\_\_

No. Floors: \_\_\_\_\_ Bldg. Height: \_\_\_\_\_

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

<input type="checkbox"/> Sq. ft. shed	<input type="checkbox"/> cement slab & thickened
<input type="checkbox"/> Sq. ft. pole building	<input type="checkbox"/> cement slab (3 1/2" - 4")
<input type="checkbox"/> Sq. ft. pool	<input type="checkbox"/> dirt floor
<input type="checkbox"/> Sq. ft. unattached frame garage	<input type="checkbox"/> trusses _____ "O.C.
<input type="checkbox"/> Sq. ft. storage bldg. & foundation	<input type="checkbox"/> rafters _____ "O.C.
<input type="checkbox"/> Sq. ft. demolition	<input type="checkbox"/> metal roof
<input type="checkbox"/> Sq. ft. basement	<input type="checkbox"/> asphalt shingles
<input type="checkbox"/> Sq. ft. crawl space	<input type="checkbox"/> metal exterior
<input type="checkbox"/> Sq. ft. deck	<input type="checkbox"/> aluminum exterior
<input type="checkbox"/> Sq. ft. porch	<input type="checkbox"/> brick exterior
<input type="checkbox"/> Sq. ft. sign	<input type="checkbox"/> block exterior
<input type="checkbox"/> Lineal ft. fence	<input type="checkbox"/> wood exterior
<input type="checkbox"/> Other	<input type="checkbox"/> number windows
	<input type="checkbox"/> number garage doors

Cost of Permit: \_\_\_\_\_

Building Dept.

By: \_\_\_\_\_

Make Checks Payable to:  
Vevay Township

Contractor		Phone ( )	
Address		City	State Zip
Federal ID No. / Social Security No.		MESC Employer No.	
License No.	Expiration Date	Worker's Disability Compensation Carrier	
If exempt from any of the above, explain here:			
Section 23A of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.15238 of the Michigan Compiled Laws, 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 238 are subject to civil fines.			

### Home Owner's Affidavit and Signature

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for necessary and timely inspections.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### AGENTS/CONTRACTORS AFFIDAVIT

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

## LOT DIAGRAM

Page 2 of Building Permit

Owner: \_\_\_\_\_

Project Address: \_\_\_\_\_

Property Tax # (Parcel No.) 33- 10- 10- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ VEVAY TOWNSHIP

Draw lot lines in feet

Label Street

Draw existing structures

Draw proposed construction

Show dimensions of all buildings

Show distance from all sides of buildings to all lot lines

Draw lakes, streams and wetlands within 500 feet

Contractor/owner will stake 2 adjacent lot lines

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_



## APPLICATION – ZONING COMPLIANCE PERMIT APPLICATION

Vevay Township  
517.676.9523

780 Eden Road Mason, MI 48854  
[supervisor@vevaytownship.org](mailto:supervisor@vevaytownship.org)

[www.vevaytownship.org](http://www.vevaytownship.org)

PERMIT NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Lot owner \_\_\_\_\_ Phone \_\_\_\_\_

Applicant email \_\_\_\_\_ Owner email \_\_\_\_\_

Lot owner address \_\_\_\_\_

Parcel Number 33-10-10- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Description of intended use or activity:

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Zoning Administrator Comments:

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Zoning Permit cost \$ \_\_\_\_\_

\_\_\_\_\_  
ZONING ADMINISTRATOR

If denied, an application for appeal must be filed within 14 days of the denial letter from the Zoning Administrator. Applicant hereby authorizes any Vevay Township Official to enter the above described premises for inspection purposes.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF LOT OWNER

\_\_\_\_\_  
DATE

VEVAY TOWNSHIP  
780 EDEN RD.,  
MASON, MI 48854  
517-676-9523 / fax 517-676-6655

## Property Line Verification

I certify that the location of the property line is true and correct as identified to the Zoning Administrator.

If the location of the property line is incorrect, I am responsible for identifying the property line and moving the building if necessary.

\_\_\_\_\_  
Signature of property owner

\_\_\_\_\_  
Print name of property owner

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Date

\_\_\_\_\_  
Permit #

# Patrick E. Lindemann

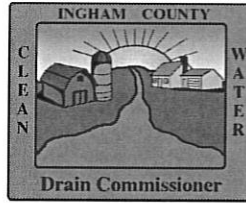
## Ingham County Drain Commissioner

PO Box 220  
707 Buhl Avenue  
Mason, MI 48854-0220

Phone: (517) 676-8395

Fax: (517) 676-8364

<http://dr.ingham.org>



Carla Florence Clos  
Deputy Drain Commissioner

Paul C. Pratt  
Deputy Drain Commissioner

Angie Cosman  
Chief of Engineering and Inspection

Sheldon Lewis  
Administrative Assistant

### SOIL EROSION AND SEDIMENTATION CONTROL PERMIT WAIVER

PERMIT WAIVER #

Date \_\_\_\_\_ Waiver# \_\_\_\_\_

Applicant \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Land Owner \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Project Address \_\_\_\_\_ Owner Email \_\_\_\_\_

Legal Description: Section \_\_\_\_\_ Town \_\_\_\_\_ Range \_\_\_\_\_

Property Tax ID # \_\_\_\_\_ Township / City \_\_\_\_\_

Earth Change Description \_\_\_\_\_

Drain Number \_\_\_\_\_ Drainage District \_\_\_\_\_

This is to advise you that from the information provided, and pursuant to Part 91, Soil Erosion and Sedimentation Control of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, and the Rules promulgated under Part 91, being R 323.1701 to R 324.1714, a Soil Erosion and Sedimentation Control Permit is not required. This Waiver may be presented to your local building official for compliance with Rule 323.1711. **THERE IS NO FEE OR CHARGE FOR ISSUANCE OF THIS WAIVER.**

This Agency has determined that the activity as proposed qualifies for a Waiver because either the activity is more than 500 feet from the water's edge of a lake or stream and the amount of earth change is less than one acre, or the activity does not otherwise require a Permit under Part 91 or the Rules (R 323.1705). This Waiver does not exempt any party from acquiring any other applicable permits through federal, state, county, or local agencies. Further, this Waiver does not exempt the earth disturbance activity from enforcement of Part 91, 1994 PA 451, as amended, and its Rules where there is a violation. Review of proposed drainage and grading plans has not been performed for this project and this Agency, by issuance of this Waiver, accepts no responsibility for any and all damages incurred by improper earthwork which might increase runoff and be subject to civil sanctions.

If the scope of activity changes or is different from what has been described, or if information is contrary to that submitted to this Agency, a Permit may be required; and, you must contact this Agency before commencing that earth disturbance. The County Enforcing Agency has the authority to stop any activity not in compliance with Part 91, 1994 PA 451, as amended, and its Rules.

I, the undersigned, affirm that the project referenced above will be completed as described to the County Enforcing Agency on this date.

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Landowner's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Reviewed and approved by: \_\_\_\_\_ Date \_\_\_\_\_

**YOU MUST POST A COPY OF THIS WAIVER AT THE PROJECT SITE VISIBLE FROM THE PUBLIC ROAD**