



RESIDENTIAL PERMIT APPLICATION CHECKLIST

Vevay Township
517.676.9523

780 Eden Road Mason, MI 48854
supervisor@vevaytownship.org

www.vevaytownship.org

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** – Required for **ALL applications**.

___ 3. **Site Plan** – Required for **ALL applications**.

___ 4. **Building Plans or Drawings** are required for **ALL applications**.

Include wall section, foundation plan, trusses, floor plan, and all documents required by the 2015 Residential Code.

___ 5. **Parcel Number** – Required for **ALL applications**.

___ 6. **Soil Erosion Permit/Waiver**. Required for **ALL applications**.

Ingham Co. Drain Commission: (517)-676-8395

___ 7. **House Number/Address** is required for **ALL residences**.

The Township Supervisor and Assessor will assist in creating a new address if needed.

STATE PERMITS

___ 8. **Michigan Uniform Energy Code Compliance**.

Required for **ALL site-built NEW construction**; documentation must be provided demonstrating compliance with the energy code.

___ 9. **Sanitation/Water Supply Permit**. Required for **NEW residential**.

Ingham Co. Environmental Health: (517)-887-4312

___ 10. **Driveway/Sidewalk Permit**. Required for **NEW driveway**.

Ingham Co. Road Commission: (517)-676-9722

___ 11. **Mechanical, Electrical & Plumbing Permits.**

State of Michigan: (517)-241-9313

___ 12. **DNR Approval.** Required **ONLY IF** property is located within wetlands or a flood plain.

DNR: (517)-243-5002

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 electrical, plumbing, mechanical, or structural building permits.

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 a residential building or a residential structure. Violators of section 23a are subjected to civil fines.

SIGNATURE OF APPLICANT

DATE

Building plans and drawings must contain sufficient detail to perform a plan review for conformance with the Michigan Residential 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 must be forwarded to our office at the time of delivery.

NO PERMIT IS REQUIRED FOR:

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

RE-SIDING: No physical change other than siding.

WINDOW REPLACEMENTS: 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 in all inspection requests to the **Vevay Township Office** **before 3:30pm** on the day before the inspection is needed.



BUILDING PERMIT APPLICATION

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PERMIT NUMBER: _____ DATE: _____

Applicant _____ Phone _____

Lot owner _____ Phone _____

Applicant email _____ Owner email _____

Lot owner address _____

Parcel Number 33-10-10- _____ - _____ - _____

Basic Dimensions: _____ feet by _____ feet No. floors _____ Bldg. Height _____

For Residential Use Only:

_____ Sq Ft main floor	_____ No. rooms 1 st floor	_____ Sq Ft porches
_____ Sq Ft second floor	_____ No. bedrooms	_____ Sq Ft breezeways
_____ Sq Ft finished basement	_____ No. full baths	_____ Sq Ft deck
_____ Sq Ft unfinished basement	_____ No. half baths	_____ (Ft.) ceiling height
_____ Sq Ft garage	_____ No. fireplaces	_____ (Ft.) building height
(attached garage requires fire separation)	_____ No. chimneys	
	_____ No. wood burners	

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

Foundations (11)

_____ Ftgs _____ x _____
 _____ Below fin grade
 _____ No. post footings
 _____ x _____
 _____ Poured walls
 _____ H.C. block _____
 _____ Wood foundation
 (provide diagram)
 _____ Ft. foundation wall height
 _____ Crawl space wall height
 _____ Crawl space vent openings
 _____ Egress sill height
 _____ No. basement windows

Exterior (4)

_____ Wood
 _____ Aluminum/Vinyl
 _____ Brick
 _____ Block

Rough-In Framing (16)

_____ Sill plate (treated)
 _____ Wall plates
 _____ Headers
 _____ Wood girder
 _____ Steel girder
 _____ Post _____ Ft. O.C.
 _____ Stud wall
 _____ Masonry
 _____ Floor joists _____ In. O.C.
 _____ Ceiling joists _____ In. O.C.
 _____ Rafters _____ In. O.C.
 _____ Truss
 (provide diagram)
 _____ In. Floor sheathing
 _____ In. Wall sheathing
 _____ In. Roof sheathing
 _____ In. Corner brace sheath

Windows (5)

_____ No. of windows
 _____ Wood sash
 _____ Metal sash
 _____ Vinyl sash
 _____ Egress/bedrooms

Roofs (11)

_____ Hip
 _____ Gable
 _____ Front overhang
 _____ Other overhang
 _____ Eavestrough
 _____ Metal
 _____ Asphalt shingles
 _____ Underlayment
 _____ Vents
 _____ Other coverings
 _____ Attic access 22in.x30in.

Insulation (10)

- In. Fiberglass
- In. Cellulose
- In. Blown in fiberglass
- In. Foam
- Other
- In. Rigid poly ure.
- In. Rigid styro
- In. Insul sheath
- Wind barrier
- (mil) Moisture barrier

Interior (8)

- Foyer
- Kitchen floor
- Other floor
- Drywall
- Plaster
- Covered ceiling
- Panel wainscot
- 5/8 in. garage fire code

Chimney Type (4)

- Brick
- Block
- Stone
- Zero clearance

Built-In Items (9)

- Oven
- Range
- Disposal
- Hoods/Fan
- Dishwasher
- Refrigerator
- Incinerator
- Vanities
- Ft. Cupboard length

**** A \$60.00 fee will be charged if a re-inspection is required. ****

Trade permits are separate from the building permit:

Electrical Permit

Yes No

Mechanical Permit

Yes No

Plumbing Permit

Yes No

Estimated Cost of Project \$ _____

Permit Cost \$ _____

By: _____

Vevay Township Official

Next Steps:

Upon approval of application materials and building plans an invoice will be issued.

Upon payment of the invoice, the permit will be issued.

Payments can be made by credit card online, at: [Make Payment | Vevay Township](#) (the company charges 2.75% to do so) or you can stop by and pay by cash, check, or credit card. All credit card transactions will take 24 hours to process.

Make checks payable to: Vevay Township

Our office hours are 10:00am to 4:00pm, Monday through Friday.

Please call in all inspection requests to the **Vevay Township Office** before 3:30pm on the day before the inspection is needed.



APPLICATION – ZONING COMPLIANCE PERMIT APPLICATION

Vevay Township
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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:

Zoning Administrator Comments:

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



PROPERTY LINE VERIFICATION

Vevay Township
517.676.9523

780 Eden Road Mason, MI 48854
supervisor@vevaytownship.org

www.vevaytownship.org

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 LOT OWNER	DATE
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PRINTED NAME OF LOT OWNER	DATE
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Address	City
---------	------

State	Zip Code
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SITE PLAN

Vevay Township
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www.vevaytownship.org

Lot owner _____

Lot address _____

Parcel Number 33-10-10-_____-_____-_____

1. Draw lot lines (show dimensions in feet)
2. Label streets
3. Draw existing structures and driveways with dimensions.
4. Draw proposed construction and any proposed driveways with dimensions.
5. Show distance from all sides of buildings to property lines in feet.
6. Draw location of septic field and well.
7. Draw lakes, streams, and wetlands on your property.
8. Contractor/owner will stake 2 adjacent lot lines for the first inspection.
9. Contractor/owner will stake proposed building location for first inspection.
10. Contractor/owner will stake proposed building location and clearly identify lot lines for first inspection.

SIGNATURE OF APPLICANT

DATE



CONTRACTOR INFORMATION

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The applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information.

Contractor Name _____ Phone _____

Contractor Email _____

Address _____ City, State, Zip Code _____

Federal ID _____ MESC Employer No. _____

License No. _____ Exp Date _____

Worker's Compensation Carrier _____

If exempt from any of the above, explain here:

Homeowner's Affidavit and Signature

I hereby certify that the work described in this application shall be installed in accordance with the local code and shall not be enclosed or covered up until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility of arranging for necessary and timely inspections.

SIGNATURE OF HOMEOWNER

DATE

Agent/Contractor's Affidavit and Signature

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/her authorized agent. I also certify that all work will be properly inspected in a timely fashion.

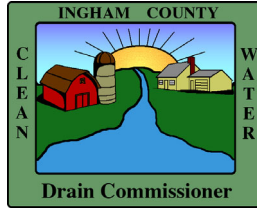
SIGNATURE OF AGENT/CONTRACTOR

DATE

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 _____ Land 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 323.1714, 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

DRAIN OFFICE TO COMPLETE HIGHLIGHTED FIELDS