

GARAGE CHECKLIST

Please use the following checklist as a guide for the materials needed to issue a zoning permit and a building permit for a Garage. All information must be complete and provided to the City in order to issue the appropriate permits and approvals.

- Completed zoning permit
- Proof of Ownership: a recorded land contract or deed with a legal description of the property
- An acceptable, legible plot plan that shows property dimensions including all setbacks. Setbacks from other structures on the property. Also show all other overhead wires, drains, water edges, etc.
- A soil erosion permit from the Shiawassee County Drain Commission if 100 feet from water or 500 feet from the drain – or an Affidavit for a waiver.
- A completed building permit application
- A Contractor Registration Form
- A Roof Loading Data Sheet
- Cross Section Detail Form
- A complete set of building and foundation plans
- A Michigan Uniform Energy Code Form



P.O. BOX 178 • 114 WOODHULL STREET • LAINGSBURG, MICHIGAN 48848-0178
PHONE (517) 651-5374 • FAX (517) 651-5604 • www.laingsburg.us

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Accessory Use Building or Structure Zoning Permit Application
Detached: Sheds, Carports, Garages, Outbuilding, Swimming Pools, Etc.
\$25 Fee

Property Owner's Name/Address:

Applicant's Name/Address:

	Phone #:

Address of Property where accessory will be placed:

Contractor Name/Address:

	Phone #:

Type of Structure _____ Proposed Use _____

Distance from other structures (10 foot min)

House _____ Others _____ (Show drawing)

Distance from lot lines: Front _____ Rear _____ Side _____
(Side and Rear Min 10 Ft.)

Sq Feet of Rear yard _____ Sq Feet of House _____

Sq Feet of proposed accessory _____

Size of Accessory Height _____ Weight _____ Length _____

Provide drawing of placement of accessory on property. Please note locations of house, other buildings or structures locations, drives, sidewalks, etc.

Approved	Approved
Date: _____	Date: _____
Zoning Administrator	Building Official

Fee _____ Paid on _____ Permit # _____

SHIAWASSEE COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

Surbeck Building - 201 N. Shiawassee Street
CORUNNA, MICHIGAN 48817
PHONE: (989) 743-2390 FAX: (989) 743-2413
Web Address: <http://health.shiawassee.net>

GEORGE J. PICHETTE, J.D.
Director/Health Officer
DENNIS CHERNIN, M.D., M.P.H.
Medical Director

GENE PAEZ, R.S., M.P.H.
Director of Environmental Health

AFFIDAVIT FOR SOIL EROSION SEDIMENTATION CONTROL PERMIT WAIVER

Pursuant to Part 91, Soil Erosion Sedimentation and Control, of Act 451 of the Public Acts of 1994, as amended.

Owner's name: _____

Mailing address: _____

Property address: _____

Phone number: _____

Legal Description: Section _____ T. _____ N. R. _____ E., _____ Township

Description of Earth Change Project: _____

I, _____ as the property owner, do hereby certify that the earth change at the above referenced property will disturb less than 225 square feet and the earth change will not contribute sediment to lakes or streams.

Signature: _____ Date: _____

AGENCY USE ONLY

This request for a SESC permit waiver has been reviewed by SCHD and is hereby issued in accordance with Rule 1705 (2) of Part 91.

Reviewed by: _____ Date: _____



SHIAWASSEE COUNTY HEALTH DEPARTMENT
201 N. Shiawassee St., Surbeck Bldg., Corunna, MI 48817
Website <http://health.shiawassee.net>

Katie Plashek, R.S.
Registered Environmental Health Sanitarian

Soil Erosion and Sedimentation Control

(All earth changes will require review)

When might a permit from the Environmental Health Division be required?

1. If your project involves **disturbing soils** over an area of **one or more acres**.

2. If your project is **within 500 feet** of a lake, stream, river, drain, or other water body.
3. All projects involving earth moving activities that disturb **more than 225 square feet** (an SESC waiver **might** be issued for projects disturbing **less than 225 square feet**).
4. If your construction project is for a **permanent dwelling or a large-scale addition** to an existing home.

If you answered **yes to any of the questions** a SESC permit or verification that no permit is required will be needed as part of your Zoning permit application.

Zoning applications for projects such as decks, porches, swimming pools, small additions, and small accessory buildings **may** be reviewed in house. This **does not prohibit** an SCHD representative from conducting a site visit to determine whether or not a SESC permit will be required.



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City of Laingsburg

Shiawassee County
Laingsburg, Michigan 48848
Application for Building Permit

Section # _____ Date _____

The undersigned in compliance with the laws of the State of Michigan and the ordinance of the City of Laingsburg hereby makes application under the above mention laws, ordinances and regulations hereby set forth for permission to;

Build, Demolish, Move _____ Building Size _____
Address _____ Owners Name _____

Contractor _____ License # _____ Expires _____
Address _____ City _____ State _____ Zip _____
Phone # _____

Workman's Comp Carrier _____

Internal Rev. Code # _____

Or reason for exemption

Michigan Employment Comp. # _____

Or reason for exemption

Specifications

Set Back _____ Side _____ Rear _____

Roof Type _____ No. Rooms _____ No. Bath _____

Footing _____ Basement _____

Construction _____ Garage _____

Drywall _____ Plaster _____ Fireplace _____

Chimney Type _____ Siding _____

Rafters _____ OC _____ Studding _____ OC _____

Floor Joist _____ OC _____ Sewer _____

Water _____ Detectors _____ Fire _____ Smoke _____

Approved _____

Building Inspector

Cert of Occupancy # _____ Permit # _____ Fee _____

Est. Cost _____ Contractor must sign application

I hereby certify 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 authorized agent, and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being section 125, 1523a of the Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who perform work on a residential building or residential structure. Violators of Section 23 are subject to civil fines.

Signed (Contractor) _____

There will be a charge of \$25.00 on any returned checks



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Contractor Registration

City of Laingsburg Building Inspections Department
No Fee Required

Date of Registration _____

Company Name _____

Licensed Person _____

Mailing Address _____ City _____ State _____ Zip _____

Telephone Number (____) _____ - _____ Fax Number (____) _____ - _____

Cell Number (____) _____ - _____

Type of License _____

License Number _____ Master Number if Applicable _____

Expiration Date/s _____

Fed I.D. # _____

Workman's Comp Carrier _____ (If Required)

Social Security Number _____

Divers License Number _____

Date of Birth _____

Attest: The information given is complete, true, and correct. I understand that work is required to be done in accordance with the Michigan Construction Code, and that I am responsible for scheduling all necessary inspections.

Licensee Signature _____

All contractor registration forms must be accompanied by a copy of your contractor's license and driver's license

Roof Loading Data Sheet

Authority: Act 230 PA 1972, as amended

Completion: Completed prior to application for plan review and building permit. This form is a voluntary form used to assist in the permit approval process.

Jurisdictional information should be included in this space

Applicant's Name:		Date:
Applicant's Address:		Permit Number:
City:	State:	Zip:
Applicant's Signature:		
Job Location:		
Address:		
Township/Village/City:		County:

THIS FORM SHOULD BE COMPLETED BY THE PERMIT APPLICANT, OR DESIGN PROFESSIONAL

FOR C_e , C_t , AND I , PLACE AN "X" IN THE APPROPRIATE BOX THAT BEST DESCRIBES THE STRUCTURE

Ground Exposure, P_g = _____ From Figure R301.2(5) MRC or Figure 1608.2 MBC

Exposure		Exposure Factor C_e			
		Fully Exposed ¹	Partially Exposed ²	Sheltered ³	
A	Large city center with at least 1/2 the buildings exceeding 70 ft. in height.	N/A	1.1	1.3	
B	Urban and suburban areas, wooded areas or other terrain with closely spaced objects having the size of single-family dwellings or larger.	0.9	1	1.2	
C	Open terrain with scattered obstructions having heights less than 30 ft. (flat open country)	0.9	1	N/A	
D	Flat unobstructed areas exposed to wind flowing over open water for a distance of at least 1 mile. (i.e. Great Lakes.)	0.8	0.9	N/A	

¹Fully Exposed: Roofs exposed on all sides with no shelter by terrain, higher structures, or trees.

²Partially Exposed: All roofs except those designated as "fully exposed" or "sheltered."

³Sheltered: Roofs located tight among conifers that qualify as obstructions.

Thermal Factor C_t

Thermal Condition ⁴	C_t
All structures except as listed below	1
Structures kept just above freezing and those with cold, ventilated roofs with an R factor of 25 or greater between the ventilated and heated spaces, such as attics	1.1
Unheated structures and those intentionally kept below freezing, such as seasonal building or storage buildings	1.2
Continuously heated greenhouse with a roof R-Value less than 2 and having an interior temperature maintained at about 50 degrees 3 ft above the floor during winter months and a temperature alarm system or an attendant to warn of a heating failure.	0.85

⁴These conditions shall be representative of the anticipated conditions during winter months for the life of the structure

Importance Factor

Category	I
I Building and other structures representing low hazard to human life, i.e.: Agricultural, Temporary, and Minor Storage Facilities.	0.8
II All buildings except those listed in Categories III and IV.	1
III Building and other structures representing substantial hazard to human life in the event of failure.	1.1
IV Buildings and other structures designated as essential facilities.	1.2

Attic Live Load

Entire Attic	Y/N
Specific Areas (if yes, list areas below)	Y/N
List Rooms:	

ROOF DESIGN

Issue

With the adoption of the Michigan Building Code (MBC) and Michigan Residential Code (MRC) in 2001, several questions have been raised regarding the application of the code provisions relating to roof snow loads.

In previous editions of the codes in effect in Michigan, the codes set forth specific requirements for roof loading. However, with the adoption of the MRC, some confusion has been raised regarding the methodology of determining roof loads for one- and two-family dwellings regulated by the MRC. In a number of instances, the design of roof truss systems has not reflected the dynamics of the site at which the system is installed. The MBC requires consideration for such items as exposure, thermal factors, and importance factors. While the MRC does not specifically identify these items as design considerations, the code requires compliance in engineered systems with accepted engineering practices.

To clarify this situation, responses to two questions are posed to offer clarification and guidance in the application of the Michigan Building Code and the Michigan Residential Code. The first question involves the application of loading criteria for snow loads. The second involves exposure factors.

It is the intent of this Technical Bulletin to provide guidance in the application of the code and to provide a means for local code officials to review the design to determine compliance with the applicable code provisions.

Discussion

The Michigan Building Code references ASCE 7 – 98, Minimum Design Loads for Buildings and Other Structures, to determine the applicable loading criteria for roof structures. Section 1608.2 of the code provides for ground snow loads.

The Michigan Residential Code, while not directly referencing ASCE 7, can be interpreted that the standards for truss designs are based upon the criteria contained in this document. Section R801.2 of the MRC provides:

“Roof and ceiling construction shall be capable of accommodating all loads imposed according to Section R301 and of transmitting the resulting loads to the supporting structural elements.”

Section R802.2 provides:

“Roof-ceilings shall be designed and constructed in accordance with the provisions of this chapter and Figures R606.10(1), R606.10(2) and R606.10(3) or

SHIAWASSEE COUNTY BUILDING DEPARTMENT

CROSS SECTION DETAILS:

(Fill out only items that apply to your project.)

ROOF-CEILING CONSTRUCTION

- Ridge board _____
- Rafters 2X____, ____oc (on center)
- Ceiling joist 2X____, ____oc
- Eng. Rafters_____, ____oc
- Eng. Trusses_____, ____oc
- Roof sheathing_____
- Fascia board_____
- Ice shield_____

- Felt paper_____
- Roof covering_____

WALL CONSTRUCTION

- Double top plate 2X____
- Bottom plate 2x____
- 2X____ wall studs, ____oc
- Headers__X____, Eng. beams_____
- Wall sheathing_____
- Eng. walls_____
- House wrap_____

FLOOR CONSTRUCTION

- 2X____ floor joist, ____oc
- Eng. floor_____, ____oc
- Floor sheathing_____
- Beams / Girders_____
- Sill plate 2X____
- Sill plate anchors:
1/2" bolts____, ____oc
eng. straps____, installed per man. spec.

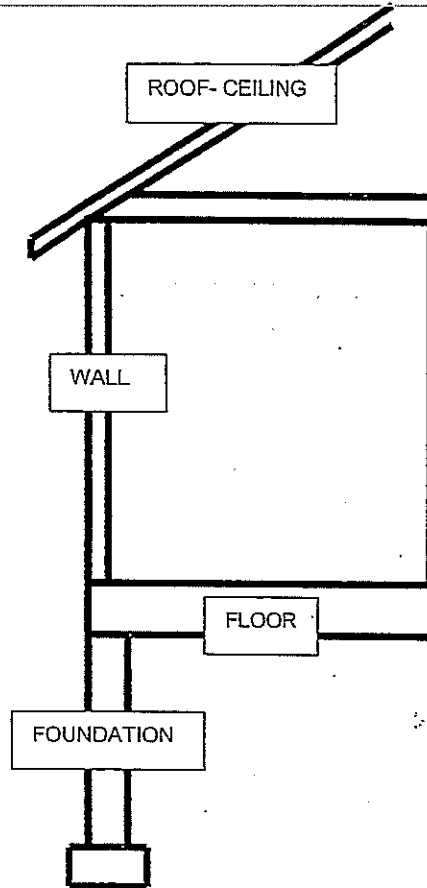
- Concrete slab_____
- Vapor retarder_____

FOUNDATION

- Foundation walls:
wood framed__ Design Required
masonry__ (height____ thickness____)
concrete__ (height____ thickness____)
insulating (ICF)__ (height____ thickness____)
post / columns__ (____X____, ____oc)
- Footing: (Minimum 42" from bottom to final grade.)
trench__ (width____ depth____)
form / rail__ (depth____ width____)
post / pier__ (diameter____ depth____, ____oc)
- Dampproofing__ Waterproofing__
- Foundation drainage__ type_____

EXTERIOR COVERINGS

- Fascia_____
- Soffit_____
- Siding_____
- Veneer_____



Job address _____

Township_ City_ Village_

Name _____

Phone number _____

Type of work _____

SHIAWASSEE COUNTY BUILDING DEPARTMENT

ENERGY CODE COMPLIANCE FORM PRESCRIPTIVE METHOD

Building Component Minimum Required Insulation R Value (R13)
(Walls: Top of wall to top of foundation, including rim joist)

Window and door area (Fenestration openings)

Calculate % of windows and doors compared to total area:

Total wall area (Top of wall to finish grade) = _____ square feet

Total window and door area = _____ square feet

Window and door area divided by wall area = _____ % (Percent)

For 0% to 15% use (R1.9) windows _____

For 16% to 20% use (R2.5) windows _____

(If over 20% the Prescriptive Method can not be used.)

Roof / Ceiling Insulation

Calculate % of skylight opening compared to total roof (ceiling area):

Total Roof (Ceiling Area) = _____ square feet

Total Skylight Area = _____ square feet

Skylight area divided by roof / ceiling area = _____ % (Percent)

For 0% to 10% use (R30) insulation in roof area ceiling.

Floors over unconditioned spaces and exterior overhangs. (R21)
Slab on grade floors and its supporting foundation:

Non heated space (R5)

Heated space (R10)

Crawl space walls (R5)

Finished lower level (basement) walls (R5)

Exposed basement walls (more than 7% of gross wall area) (R5)

Total non heated exposed wall = _____ square feet

Total exposed wall area of house = _____ square feet

Non heated wall area divided by total wall area, times 100 = _____ % (Percent) of non insulated wall (to be less than 7%)

Job address _____

Township__ City__ Village__

Applicant Signature _____

Date _____

~~This form shall be filled out completely before approval is given.~~

Plot Plan

SAMPLE

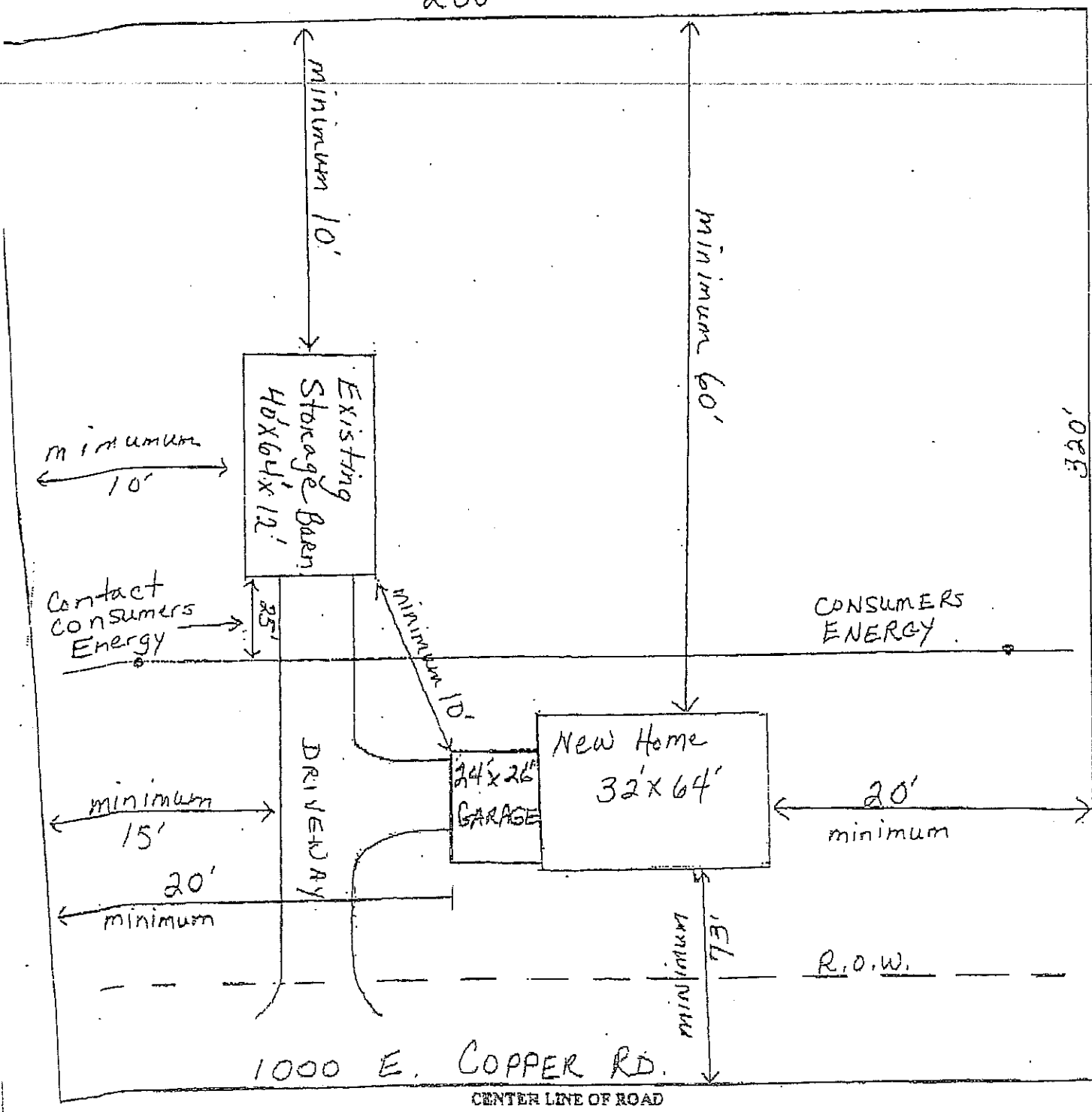
SHAWASSEE COUNTY ZONING SITE PLAN GRID

NAME John Doe PROJECT ADDRESS 1000 E. COPPER RD.

LOT SIZE 200 x 320 or NUMBER OF ACRES _____

(SEE REVERSE SIDE FOR INSTRUCTIONS)

200'



Building & Trade Permits And Inspections

Shiawassee County Building Department Main Number:

989-743-2396

Inspector:

Dave Chrenka, Building Inspector: 989-743-2396

Housing Rehabilitation Program:

Lindsay Hager: 231-225-2619

lhager@hagerconsulting.biz

Planning & Zoning

Paula Willoughby, Zoning Administrator: 517-651-5374

**Peter J. Preston, Community Planning & Zoning Consultant:
517-256-0566**