

City of Laingsburg  
114 N Woodhull P.O. Box 178  
Laingsburg, MI 48848  
Ph: (517) 517-5374 Email: [clerk@laingsburg.us](mailto:clerk@laingsburg.us)  
<https://www.laingsburg.us/building-zoning/building-zoning-forms/>

**CONSTRUCTION PERMIT CHECKLIST**  
(For all projects other than new homes)

- \_\_\_\_\_ 1. Completed **Zoning Permit Application\***.
- \_\_\_\_\_ 2. **Proof of Ownership** if purchased within the last year.
- \_\_\_\_\_ 3. **Completed Site Plan Grid**
  - a. Minimum site plan requirements are listed on Page 4 of this packet.
  - b. A sample site plan grid is listed on Page 5 of this packet.
- \_\_\_\_\_ 4. **Soil Erosion and Sedimentation Review:** A [soil erosion review](#) is **required** by the State of Michigan through the office of Environmental Health.
- \_\_\_\_\_ 5. **Septic/Sewage Permit:** If the project includes a net increase in bedrooms, the [Environmental Health Department](#) must issue a permit or waiver.

**BUILDING PERMIT**

(Contractors must be registered with the Building Department)

- \_\_\_\_\_ 1. Completed **Building Permit Application** listed on Page 6 of this packet.
- \_\_\_\_\_ 2. **Blueprints/Plans:** Two (2) complete sets of building and foundation plans and specifications, including a cross-section of the proposed project.
- \_\_\_\_\_ 3. **Truss Drawings** submitted with this application packet.
- \_\_\_\_\_ 4. **Proof of Ownership:** Proof of ownership must be provided with the Building Permit when the project does not require a Zoning Permit.

**PERMITS WILL NOT BE ISSUED WITHOUT REQUIRED DOCUMENTATION**

\*Commercial and Industrial construction requires Site Plan Review Approval

# APPLICATION for a ZONING PERMIT

City of Laingsburg

114 N Woodhull

P.O. Box 178

Laingsburg, Mi 48848

Phone: (517) 651-5374 • Fax: (517) 651-5512

Email: clerk@laingsburg.us

App. Date: \_\_\_\_\_ Receipt # \_\_\_\_\_ Fee: \$ \_\_\_\_\_ Permit # \_\_\_\_\_

Review Date: \_\_\_\_\_  Approved  Denied By: \_\_\_\_\_

Property Address/Location		Applicant (if not Owner)	
Address/Street: _____		Name: _____	
Nearest Cross Rd.: _____		Address: _____	
Township: _____		City/State/Zip: _____	
Parcel Number: _____		Phone: _____	
Zoning District: _____		Fax/Email: _____	
Owner Information		If New Construction or Addition	
Name: _____		<b>Please Attach All That Apply:</b> <input type="checkbox"/> Land Division Certificate <input type="checkbox"/> Survey <input type="checkbox"/> Proof of Ownership <input type="checkbox"/> Septic Permit # _____ Well Permit # _____ <input type="checkbox"/> Driveway Permit <input type="checkbox"/> Soil Erosion Permit <input type="checkbox"/> New Address <input type="checkbox"/> New Sewer Connection	
Address: _____			
City/State/Zip: _____			
Phone: _____			
Fax/Email: _____			
Type of Request		Yes	No
<input type="checkbox"/> Principal Structure			
<input type="checkbox"/> Accessory Structure			
<input type="checkbox"/> Agricultural Structure			
<input type="checkbox"/> Temporary Structure/Use			
<input type="checkbox"/> Demolition Permit			
<input type="checkbox"/> Sign			
<input type="checkbox"/> Home Occupation			
<input type="checkbox"/> Fence			
<input type="checkbox"/> Deck or Porch			
<input type="checkbox"/> Pool			
<input type="checkbox"/> Solar			
<input type="checkbox"/> Outdoor Solid Fuel Furnace			
<input type="checkbox"/> Shared Driveway			
<input type="checkbox"/> Buildable Lot Study			
<input type="checkbox"/> Hazardous Material Storage			
<input type="checkbox"/> Other: _____			
<b>For All Applications</b>			
Did you attach a "Site Plan Drawing"?			
Are you making grade (earth) changes?			
Is your project within 500 ft. of surface water?			
Is this site currently violating the Ordinance?			
<b>For Sign Permits Only</b>			
Type of Business: _____			
Total display area in square feet: _____			
Proposed setback from Right-of-Way: _____			
Sign height: _____ Sign purpose: _____			
Type: <input type="checkbox"/> Pole <input type="checkbox"/> Ground <input type="checkbox"/> Wall <input type="checkbox"/> Other			
Height and width of wall: _____			
Attach Sign drawing showing copy <input type="checkbox"/>			
<b>Describe Proposed Building or Land Use:</b>			
_____			
_____			

**AFFIDAVIT OF COMPLIANCE**

I am the owner of, or the authorized agent of the owner, of the lot (parcel of land) described and shown on the attached site plan. I am familiar with the Shiawassee County Zoning Ordinance, including the related laws listed in Section 16.5.3. I hereby attest based upon my knowledge and belief that this request is complete, in compliance with, and warrants approval under the Shiawassee County Zoning Ordinance of 1999, as amended.

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

\_\_\_\_\_  
Date



**City of Laingsburg**  
**114 N Woodhull Rd**  
**Laingsburg, MI 48848**

**Building Official: Rob Kehoe**  
 Phone: (810) 516-1191  
 Email: bldoff3889@aol.com

**120**  
**B 2024 B**

Authority: 1972 PA 230 Penalty: Failure to provide the information may result in denial of your request.	LAINGSBURG is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
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Project or Facility Information			
PROJECT NAME		ADDRESS	
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED			CITY
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township   OF:			ZIP CODE
COUNTY	BETWEEN		AND

Applicant				
NAME			E-MAIL	
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)

Owner of the land in fee on which the building or structure will be constructed				
NAME			ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)	

Cost and Fees				
ESTIMATED PROJECT COST				
\$ _____				
Re-Open Expired Permit	\$40.00			
CERTIFICATE OF OCCUPANCY (\$50.00 FEE) <input type="checkbox"/> YES <input type="checkbox"/> NO		BUILDING PERMIT FEE ENCLOSED (The first \$100.00 of an application is non-refundable)   \$ _____		OR STATE ACCOUNT NUMBER _____

Validation – For Department Use Only	Validation Area
USE GROUP _____  TYPE OF CONSTRUCTION _____  SQUARE FEET _____  APPLICATION FEE (non-refundable) \$ _____  CERTIFICATE OF OCCUPANCY <input type="checkbox"/> YES <input type="checkbox"/> NO \$ _____  NUMBER OF INSPECTIONS _____ \$ _____  TOTAL PERMIT FEE \$ _____  APPROVAL SIGNATURE _____	_____          _____

Residential builder or Residential maintenance and alteration contractor			
NAME	COMPANY NAME	ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
STATE OF MICHIGAN LICENSE NUMBER			EXPIRATION DATE
FEDERAL EMPLOYER ID NUMBER (or reason for exemption)		WORKERS COMP INSURANCE CARRIER (or reason for exemption)	
UNEMPLOYMENT INSURANCE AGENCY EMPLOYER ACCOUNT NUMBER (or reason for exemption)			

Purpose of Project				
<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> ALTERATION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> FOUNDATION ONLY	<input checked="" type="checkbox"/> RELOCATION
<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR	<input type="checkbox"/> MOBILE HOME SET-UP	<input type="checkbox"/> PREMANUFACTURE	<input type="checkbox"/> OTHER _____

**Plan Review Required**

2 sets of construction documents are required with each application for a permit. Construction documents must be sealed and signed by an architect or professional engineer in accordance with 1980, PA 299 as amended. The seal and signature is not required for one- and two-family dwellings less than 3,500 square feet of calculated floor area and public works less than \$15,000 in total construction cost. Applicant must submit a detailed statement in writing, verified by affidavit of the individual making it, of the specifications for the building or structure, and full and complete copies of the plans drawn to scale of the proposed work. Applicant must also submit a site plan showing the dimensions, and the location of the proposed building or structure and the other buildings or structures on the same premises.

Residential - Buildings Regulated by the Michigan Residential Code		
<input type="checkbox"/> ONE FAMILY	<input type="checkbox"/> TOWNHOUSE NO. OF UNITS _____	<input type="checkbox"/> DETACHED GARAGE
<input type="checkbox"/> TWO OR MORE FAMILY NO. OF UNITS _____	<input type="checkbox"/> ATTACHED GARAGE	<input type="checkbox"/> OTHER _____

Buildings Regulated by the Michigan Building Code		
<input type="checkbox"/> (A-1) ASSEMBLY (THEATRES, ETC.)	<input type="checkbox"/> (H-1) HIGH HAZARD (DETONATION)	<input type="checkbox"/> (M) MERCANTILE
<input type="checkbox"/> (A-2) ASSEMBLY (RESTAURANTS, BARS, ETC.)	<input type="checkbox"/> (H-2) HIGH HAZARD (DEFLAGRATION)	<input type="checkbox"/> (R-1) RESIDENTIAL 1 (HOTELS, MOTELS)
<input type="checkbox"/> (A-3) ASSEMBLY (CHURCHES, LIBRARIES, ETC.)	<input type="checkbox"/> (H-3) HIGH HAZARD (COMBUSTION)	<input type="checkbox"/> (R-2) RESIDENTIAL 2 (MULTIPLE FAMILY)
<input type="checkbox"/> (A-4) ASSEMBLY (INDOOR SPORTS, ETC.)	<input type="checkbox"/> (H-4) HIGH HAZARD (HEALTH HAZARD)	<input type="checkbox"/> (R-3) RESIDENTIAL 3 (1 & 2 FAMILY)
<input type="checkbox"/> (A-5) ASSEMBLY (OUTDOOR SPORTS, ETC.)	<input type="checkbox"/> (H-5) HIGH HAZARD (HPM)	<input type="checkbox"/> (R-4) RESIDENTIAL 4 (ASSISTED LIVING)
<input type="checkbox"/> (B) BUSINESS	<input type="checkbox"/> (I-1) INSTITUTIONAL 1 (SUPERVISED)	<input type="checkbox"/> (S-1) STORAGE 1 (MODERATE HAZARD)
<input type="checkbox"/> (E) EDUCATION	<input type="checkbox"/> (I-2) INSTITUTIONAL 2 (HOSPITALS ETC.)	<input type="checkbox"/> (S-2) STORAGE 2 (LOW HAZARD)
<input type="checkbox"/> (F-1) FACTORY (MODERATE HAZARD)	<input type="checkbox"/> (I-3) INSTITUTIONAL 3 (PRISONS ETC.)	<input type="checkbox"/> (U) UTILITY (MISCELLANEOUS)
<input type="checkbox"/> (F-2) FACTORY (LOW HAZARD)	<input type="checkbox"/> (I-4) INSTITUTIONAL 4 (DAY CARE ETC.)	

WILL THERE BE FIRE SUPPRESSION?  YES  NO      SCOPE OF WORK?

Type of Construction		
<input type="checkbox"/> 1A - Non-Combustible (Protected Structural Elements) 3HR	<input type="checkbox"/> 1B - Non-Combustible (Rated Structural Elements) 2HR	<input type="checkbox"/> 2A - Non-Combustible (Rated Structural Elements) 1HR
<input type="checkbox"/> 2B - Non-Combustible (Non-Rated Structural Elements)	<input type="checkbox"/> 3A - Non-Combustibles (Exterior Walls Only)	<input type="checkbox"/> 3B - Non-Combustible (Bearing Walls Rated)
<input type="checkbox"/> 4 - Heavy Timber	<input type="checkbox"/> 5A - Combustible (Structural Elements Rated) 1HR	<input type="checkbox"/> 5B - Combustible (All Elements Not Rated)

C. Dimensions / Data			
FLOOR AREA:	EXISTING	ALTERATIONS	NEW
BASEMENT	_____	_____	_____
1ST & 2ND FLOOR	_____	_____	_____
3RD FLOOR & ABOVE	_____	_____	_____
TOTAL AREA	_____	_____	_____

Site or Plot Plan - For Applicant Use

Large grid area for drawing or notes.

Local Governmental Agency to Complete This Section

ENVIRONMENTAL CONTROL APPROVALS

Table with 6 columns: Category, REQUIRED?, APPROVED, DATE, NUMBER, BY. Rows include A - Zoning, B - Fire District, C - Health Department, D - Soil Erosion, and E - Flood Zone.

General: Building work shall not be started until the permit has been issued by the City of Laingsburg. All installations shall be in compliance with the Michigan Building Codes. No work shall be concealed until it has been inspected.

Expiration of Permit: A permit remains valid as long as work is progressing, and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work.

**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.**

I, \_\_\_\_\_ (name), \_\_\_\_\_ (title), attest that the statements, specifications, and plans submitted with this application are true and complete and contain a correct description of the building or structure, lot or parcel, and proposed work. I further attest that this application complies with the requirements of MCL 125.1510 and that I am a person authorized under MCL 125.1510(2) to make the statements and attestations contained in this application under MCL 125.1510(2).

SIGNATURE

DATE

Roof Loading Data Sheet

Authority: 1972 PA 230

Completion: This form is to be completed and given to the building official with the application for plan review and building permit. The applicant shall give a copy of the completed form to the truss manufacturer.

Jurisdictional information should be included in this space

Township	County
	Shiawassee

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

Where prescriptive design is used, the ground snow load,  $P_g$ , from Table R301.2(1) shall be used as the design roof snow except, where section R802.10.2.1 applies the design roof snow load shall be  $JP_g$ . Additional unbalanced loads for drifting across the ridge are not required. Where engineered design is used, this form is to be completed by the permit applicant or design professional. The flat roof snow load,  $P_f$  is defined as:  $P_f = 7P_g(C_e)(C_t)(I)$ . For factors  $C_e$ ,  $C_t$ , and  $I$ , place an "X" in the appropriate box below that best describes the structure and the particular jobsite and substitute the corresponding values in the formula above. The result is the flat roof snow load and is applied as the truss top chord live load, TCELL. AE live loads and snow loads, including unbalanced loads and minimum loads, are to be applied per ASCE 7, chapters 4 and 7 and this code.

Ground Snow Load  $P_g = 30$  PSF from Figure R301.2(5) or MRC Table R301.2(5)

Exposure Factor $C_e$		Fully Exposed <sup>1</sup>	Partially Exposed <sup>2</sup>	Sheltered <sup>3</sup>
B	Urban and suburban areas, wooded areas or other terrain with closely spaced objects having the size of single-family dwellings or larger.			
C	Open terrain with scattered obstructions having heights less than 30 ft. (flat open country)			
D	Flat unobstructed areas exposed to wind flowing over open water for a distance of at least 1 mile. (i.e. Great Lakes.)			

Mark only one of the 9 boxes under the exposure factor with an "X".

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

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

<sup>3</sup>Sheltered: Roofs located tight among conifers that qualify as obstructions.

Thermal Factor  $C_t$

Thermal Condition <sup>4</sup>		
All structures except as listed below		
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		
Unheated structures and those intentionally kept below freezing, such as seasonal building or storage buildings		
Continuously heated greenhouse with a roof R Value less than 2 and having an interior temperature maintained at about 50 degrees F above the floor during winter months and a temperature alarm system or an attendant to warn of a heating failure.		

Mark only 1 of the 4 boxes under the Thermal Factor with an "X".

Importance Factor (I)

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

Mark only 1 of the 4 boxes under the Importance Factor with an "X"

Note: All roof trusses have additional live (storage) loads applied to the bottom chord where required per Table R301.5.

FIGURE 802.10.1  
ROOF LOADING DATA SHEET

## Residential Frame Built (Roof, Walls, Floor, and Foundation)

**Roof:**

Pitch - \_\_\_\_\_  
 Shingles - \_\_\_\_\_  
 Felt - \_\_\_\_\_  
 Ice Barrier - \_\_\_\_\_  
 Roof Sheathing - \_\_\_\_\_  
 Truss - \_\_\_\_\_ Yes \_\_\_\_\_ No

If No Answer The Following

Rafter Size - \_\_\_\_\_  
 Rafter Spacing - \_\_\_\_\_  
 Rafter Clear Span - \_\_\_\_\_  
 Rafter Species - \_\_\_\_\_  
 Ridge - \_\_\_\_\_  
 Ceiling Joist Size - \_\_\_\_\_  
 Ceiling Joist Spacing - \_\_\_\_\_  
 Ceiling Joist Species - \_\_\_\_\_  
 Insulation - \_\_\_\_\_  
 Roof Ventilation - \_\_\_\_\_

**Walls:**

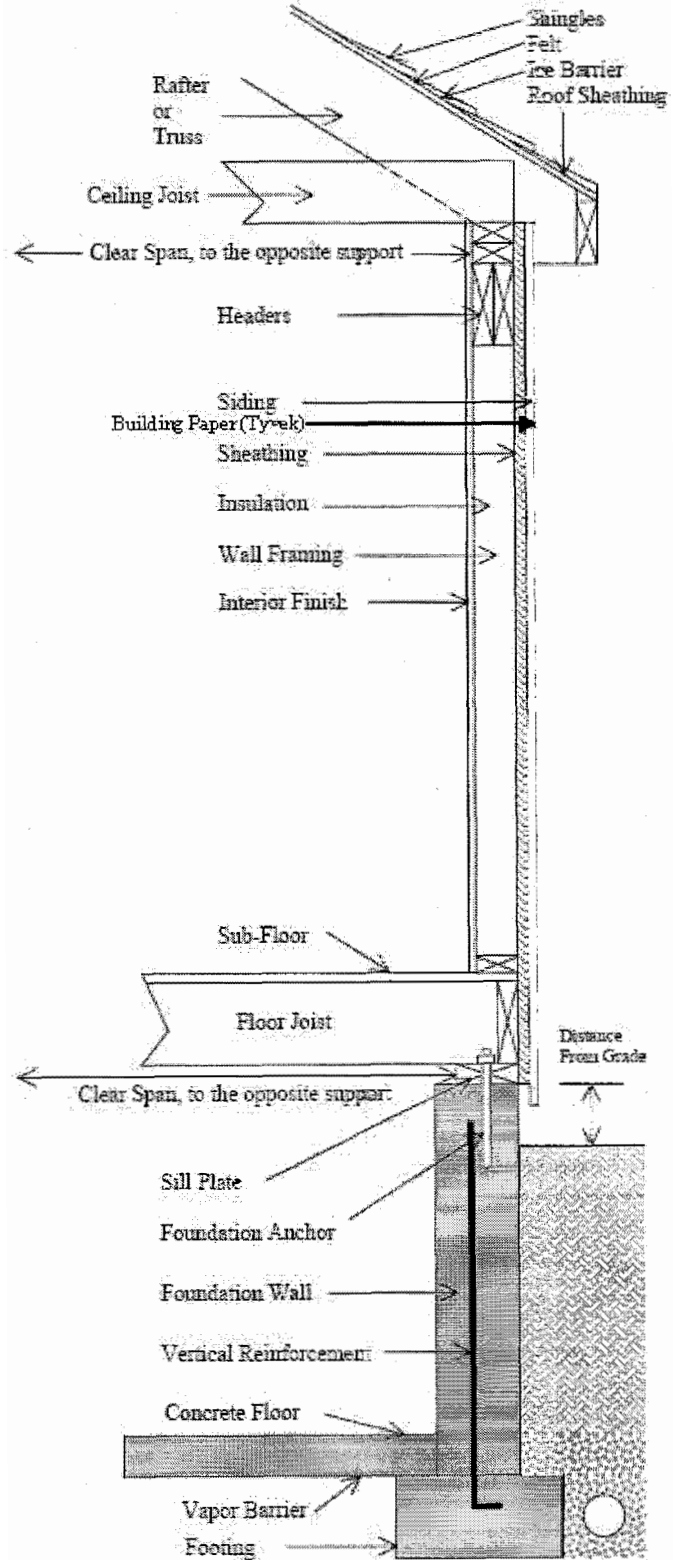
Siding - \_\_\_\_\_  
 Sheathing - \_\_\_\_\_  
 Bldg. Paper (Tyvek) - \_\_\_\_\_  
 Insulation - \_\_\_\_\_  
 Walls Framing - \_\_\_\_\_  
 Headers - \_\_\_\_\_  
 Interior Finish - \_\_\_\_\_  
 Ceiling Height - \_\_\_\_\_

**Floor:**

Sub-Floor - \_\_\_\_\_  
 Floor Joist Size - \_\_\_\_\_  
 Floor Joist Spacing - \_\_\_\_\_  
 Floor Joist Clear Span - \_\_\_\_\_  
 Floor Joist Species - \_\_\_\_\_  
 Beam Type & Size - \_\_\_\_\_  
 Distance From Grade - \_\_\_\_\_

**Foundation:**

Anchor Type - \_\_\_\_\_  
 Anchor Spacing - \_\_\_\_\_  
 Sill Plate - \_\_\_\_\_  
 Poured Wall Size - \_\_\_\_\_  
 Block Wall Size - \_\_\_\_\_  
 Vertical Reinforcement - # \_\_\_\_\_ o.c.  
 Concrete Floor Thickness - \_\_\_\_\_  
 Vapor Barrier - \_\_\_\_\_  
 Column Pad Size - \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_  
 Column Spacing - \_\_\_\_\_  
 Footing Width - \_\_\_\_\_  
 Footing Height - \_\_\_\_\_  
 Footing Depth Below Grade - \_\_\_\_\_





## Residential Garages & Accessory Structures

Roof Pitch - \_\_\_\_\_  
 Roof Covering - \_\_\_\_\_  
 Underlayment - \_\_\_\_\_

**JOB ADDRESS:**

**BUILDING SIZE:**

Roof Deck - \_\_\_\_\_  
 Trusses – Yes - No - \_\_\_\_\_

If No Fill In The Following;

Size Of Ridge - \_\_\_\_\_  
 Size Of Rafters - \_\_\_\_\_  
 Rafter Species Of Lumber - \_\_\_\_\_  
 Rafter Spacing - \_\_\_\_\_  
 Ceiling Joist - \_\_\_\_\_

### Wall Materials

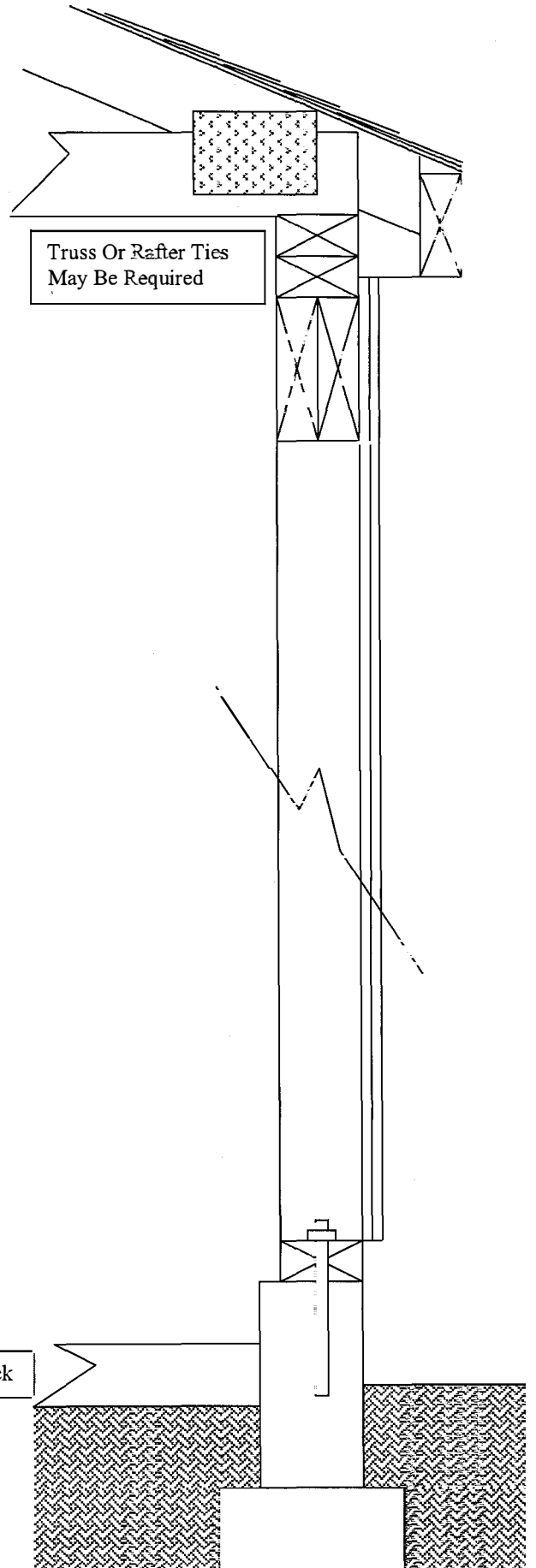
Size Of Studs - \_\_\_\_\_  
 Top Plates - \_\_\_\_\_  
 Bottom Plates - \_\_\_\_\_  
 Stud Spacing - \_\_\_\_\_  
 Garage Door Header - \_\_\_\_\_  
 Garage Door Header Span - \_\_\_\_\_  
 Service Door - \_\_\_\_\_  
 Service Door Header Span - \_\_\_\_\_  
 Window Header - \_\_\_\_\_  
 Window Header Span - \_\_\_\_\_  
 Insulation Type - \_\_\_\_\_  
 Interior Finish - \_\_\_\_\_  
 Sheathing - \_\_\_\_\_  
 Siding - \_\_\_\_\_

### Foundation

Foundation Anchor Type – Bolt \_\_\_\_\_ Strap \_\_\_\_\_  
 Foundation Anchor Spacing - \_\_\_\_\_  
 Foundation Size - \_\_\_\_\_  
 Footing Width - \_\_\_\_\_  
 Footing Depth - \_\_\_\_\_

Concrete Slab-On-Ground Floors Shall Be A Minimum 3 ½ Inches Thick

Attached Garages And Other Attached Accessory Structures Shall Have Exterior Footings And Foundation Systems That Extend 42 Inches Below Actual Grade. Detached Garages And Other Accessory Structures That Exceed 400 Square Feet Shall Have Exterior Footings And Foundation Systems That Extend 42 Inches Below Actual Grade.



## **INSPECTION REQUEST INFORMATION**

INSPECTION REQUEST LINE: (810) 516-1191

**ELECTRICAL INSPECTIONS –**

**MECHANICAL INSPECTIONS - Joe Hardin (248) 866-5765**

**PLUMBING INSPECTIONS - John Pomaville (517) 749-7707**

PLEASE HAVE THE FOLLOWING INFORMATION READY:

ADDRESS OF PROJECT

TYPE OF PERMIT

(Building, Electrical)

TYPE OF INSPECTION

(Underground, Rough, Final, etc.)

CONTACT INFORMATION OF THE PERSON REQUESTING THE INSPECTION.

HOW TO GAIN ACCESS TO PROJECT

(Key Location, Lock Box Number, Open, etc.)

**ADDITIONAL INSPECTIONS AND REINSPECTIONS ARE SUBJECT TO ADDITIONAL FEES.**

**TO CONTACT AN INSPECTOR CALL THE MAIN OFFICE (810) 516-1191**

# City of Laingsburg INSPECTION INFORMATION

PART OF THE BUILDING PROCESS IS TO IDENTIFY THE JOB LOCATION AND HAVE INSPECTIONS DONE AT SPECIFIC STAGES DURING CONSTRUCTION. BEFORE AN INSPECTOR CAN PERFORM THEIR JOB THE PERMIT HOLDER SHALL OBSERVE THE FOLLOWING RULES.

- 1: THE BUILDING PERMIT OR COPY SHALL BE KEPT ON SITE UNTIL THE COMPLETION OF THE PROJECT.
- 2: THE SITE ADDRESS SHALL BE PROVIDED IN SUCH A POSITION TO BE PLAINLY VISIBLE AND LEGIBLE FROM THE STREET OR ROAD FRONTING THE PROPERTY.

## **INSPECTIONS:**

THERE ARE A NUMBER OF INSPECTIONS REQUIRED IN EACH OF THE FOUR CODES (BUILDING, ELECTRIC, PLUMBING AND MECHANICAL); THEREFORE YOU MUST CALL WHEN YOU ARE READY FOR EACH TYPE OF INSPECTION. **ALL WORK SHALL BE INSPECTED FOR EACH TRADE AND AN APPROVAL STICKER POSTED, BEFORE WORK CONTINUES. DO NOT REMOVE ANY STICKERS UNTIL ALL FINAL INSPECTIONS ARE COMPLETE AND APPROVED.**

## **THE REQUIRED VISUAL INSPECTIONS ARE AS FOLLOWS:**

### **BUILDING**

**FOUNDATION / FOOTING:** WHEN EXCAVATION IS COMPLETED, FORMS ARE SET TRENCHES DUG, REQUIRED REINFORCING STEEL IS IN PLACE AND PRIOR TO PLACING ANY CONCRETE WOOD FOUNDATIONS: STONE AND FOOTING PLATES ARE IN PLACE.

**BACKFILL:** WHEN FOUNDATION WALLS ARE DAMPPROOFED/WATERPROOFED, AN APPROVED DRAINAGE SYSTEM INSTALLED, FOUNDATION ANCHORS INSTALLED PER MANUFACTURERS SPECIFICAT ONS AND WALLS BRACED.

**ROUGH MASONRY:** WHEN THE BASE COURSE FLASHINGS AND WEATHER-RESISTANT SHEATHING PAPER HAVE BEEN INSTALLED AND BEFORE THE INSTALLATION OF ANY MASONRY VENEER (BRICK, STONE, ETC.).

**ROUGH FRAME:** (BEFORE INSULATING OR DRYWALL) WHEN THE ROOF, ALL FRAMING, FIRESTOPPING, DRAFTSTOPPING, AND BRACING ARE IN PLACE. EXTERIOR WINDOWS AND DOORS SHALL BE INSTALLED. **THE ELECTRICAL, PLUMBING AND MECHANICAL ROUGH INSPECTIONS HAVE ALL BEEN APPROVED.**

**FIRE RATED ASSEMBLY:** BEFORE WALLS ARE TAPED AND FINISHED (COMMERCIAL ONLY);

**INSULATION INSPECTION:** BEFORE DRYWALL OR OTHER INTERIOR WALL COVERING IS IN PLACE.

**FINAL:** WHEN THE PERMITTED WORK IS COMPLETE AND PRIOR TO OCCUPANCY. THE ELECTRICAL, MECHANICALS & PLUMBING FINAL INSPECTIONS HAVE ALL BEEN APPROVED. **SITE ADDRESS INSTALLED PER THE 911 ORDINANCES.** (4" MINIMUM ON THE STRUCTURE, 3" MINIMUM ON A POST 3' - 5' TALL, OR ON A MAILBOX "POST" LOCATED ON THE LEFT HAND SIDE OF THE DRIVEWAY AS YOU ENTER THE PROPERTY AND VISIBLE FROM BOTH SIDES.)

### **ELECTRICAL**

**TEMPORARY SERVICE:** WHEN TEMPORARY SERVICE IS COMPLETE AND READY FOR HOOKUP. IT SHALL HAVE ONE (1) GROUND ROD AND A GROUNDFAULT OUTLET. **A REQUEST NUMBER IS REQUIRED.**

**PERMANENT SERVICE:** WHEN PERMANENT SERVICE IS COMPLETE AND READY FOR HOOKUP. IT SHALL HAVE TWO (2) GROUND RODS SPACED A MINIMUM OF 6 FEET APART AND A GROUNDFAULT OUTLET. **A REQUEST NUMBER IS REQUIRED.**

**UNDERGROUND:** WHILE TRENCH IS OPEN.

**ROUGH IN:** WHEN WIRE IS PULLED, BOXES MADE UP (NO FIXTURES INSTALLED) AND SERVICE IS READY TO BE RELEASED. ALL PENETRATIONS THROUGH PLATES, AT 10-FOOT INTERVALS IN WALL CAVITIES, AND INTO RETURN AIR RUNS SHALL BE FIRE STOPPED.

**FINAL:** WHEN ALL FIXTURES ARE SET AND COVERS PLATES ARE ON.

**ELECTRICAL:** JOHN KEETCH, (517) 256-3722

**MECHANICAL:** JOE HARDIN, (248) 866-5765

**PLUMBING:** JOHN POMAVILLE, (517) 749-7707

INSPECTORS MAY MAKE OR REQUIRE **OTHER INSPECTIONS** TO ASCERTAIN COMPLIANCE WITH THE CODES. PLEASE REMEMBER EACH JOB IS DIFFERENT AND GOES AT DIFFERENT PACES. THEREFORE, WE HAVE NO IDEA WHEN YOU WILL BE READY FOR AN INSPECTION. PLEASE CALL AND LET US KNOW. MAKE SURE YOU ARE READY FOR THE INSPECTION. IF AN INSPECTION IS REQUESTED AND IS NOT READY OR THE BUILDING IS LOCKED, **A RE-INSPECTION IS REQUIRED AND A FEE WILL BE CHARGED.**

**DO NOT TO COVER ANY WORK UNTIL ALL APPROVALS ARE GIVEN.**

TO REQUEST INSPECTIONS, CALL ROB KEHOE (810) 516 1191

WHEN CALLING FOR AN INSPECTION BE SURE TO HAVE THE FOLLOWING INFORMATION READY:

- A. ADDRESS OF PROJECT
- B. CONTACT NAME AND TELEPHONE NUMBER
- C. TYPE OF PROJECT (NEW HOME, ADDITION, COMMERCIAL, ETC...)
- D. TYPE OF INSPECTION REQUESTED (UNDERGROUND, ROUGH, FINAL OR REINSPECTION, ETC.)
- E. IF HOME IS OPEN OR IF THERE IS A KEY OR LOCK BOX CODE FOR THE INSPECTOR

Revised: 3/22/2024