Township of Clyde BUILDING PERMIT APPLICATION

Applicant to Complete Numbered Spaces Only:

Computer #		Date Received		Permit No.	
Job Address					
1 Owner		Address		Phone	
2		Address		Priorie	
Contractor		Address	ν.	Phone	A
3 Class of Work			·		**************************************
4 New	Addition	Alteration	Repair	oved De	emolition Sign
Use of Builiding					
5 Describe Work:		1.11.			
6					
	-				
Architect or Designer 7		Address		Phone	
Engineer 8		Address		Phone	
Change of Use From 9					
Change of Use to					
10	3				
Valuation 11			Permit fee		
Material Schedule: Studs O.C.			State of Michigan License #		
Rafters	O.C. C. Joists O.C.				
F. Joists O.C.					
Footings			Federal I.D. # or Reason for Exemption		
			13	The state of the s	
Application Accepted By	Plans Checked By	Approved for Issuance by	M.E.S.C. Number or Reas	on for Exemption	
			14		
NOTICE Workmen's Compension Policy or Reason for Exemption					
SEPARATE PERMITS A HEATING, VENTILATING	RE REQUIRED FOR E GOR AIR CONDITIONIN	LECTRICAL, PLUMBING, IG.			
THIS PERMIT BECOMES	NULL AND VOID IF WO	ORK OR CONSTRUCTION	45		
AUTHORIZED IS NOT COMMENCED WITHIN 60 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A			15		
PERIOD OF 120 DAYS AT ANY TIME AFTER WORK IS COMMENCED.					
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL					
PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.			PROPERTY OWNERS CERTIFICATE:		
AUTHORITY TO VIOLAT	E OR CANCEL THE PRO	T PRESUME TO GIVE	I CERTIFY THAT THE WORK PROPOSED IS TO BE DONE BY		
STATE OR LOCAL LA PERFORMANCE OF CO	AW REGULATING CO	NSTRUCTION OR THE	MYSELF. THE WORK IS TO BE DONE ON MY PRINICPAL RESIDENCE. I ASSUME ALL RESPONSIBILITY AND LIABILITY		
			FOR SAID WORK.	JUL ALL TILOT GIVE	IDIEIT / WO EN DIEIT
Signature of Contractor or Authorized Agent (Date)					
Signature of Owner (If Owner Builder) (Date)			Signature of Property Own	er	(Date)
WHEN PROPERLY VALIDATED (IN SPACE BELOW) THIS IS YOUR PERMIT					

RECEIPT NO.

DATE ISSUED:

CASH [

CHECK [