CASCO TOWNSHIP

7104 107th Ave.

South Haven, Michigan 49090 269/637-4441-Fax- 269/639-1991

REQUIREMENTS NEEDED TO OBTAIN A BUILDING PERMIT

1. Completed Building Permit application form.

2. Site diagram showing: Zoning application

a. Lot size

b. Proposed construction with dimensions of building(s).

- c. Setbacks from road right-of-way, side yards, and rear yard. (Contact ZA for requirements and inspections-See reverse side)
- d. Position of well, septic system, driveway, electrical and gas equipment, etc.

 (A current survey sheet which is overdrawn, the back of the permit application, or separate sheet of paper can be used for the above diagram.)

3. Two complete sets of building plans.

One set of plans will be returned to you after plan review and should be on the job site at all times for reference by contractors and inspectors. (A residence over 3500 sq. ft. or a commercial or industrial building requires sealed plans by an architect or engineer. Contact individual inspectors to determine if electrical, plumbing, or mechanical plan review is required.) If manufactured trusses are used in the project, please submit truss diagrams prior to rough-in inspection.

- 4. A copy of well and septic permits from the Allegan County Health Dept. (Call 269/673-5415). The Health Dept. also assigns house numbers to new residences; ask for an application.
- 5. Check with the Allegan County Road Commission if a culvert is needed. They will issue a driveway permit. (Call 269/673-2184)
 6. A copy of permit from the DEQ(Dept. of Environmental Quality) if project is in the
- 6. A copy of permit from the DEQ(Dept. of Environmental Quality) if project is in the High Risk Erosion Area (Lake Michigan only). Call 269/567-3564 -John Bahya
- 7. The following permits are also required depending upon the scope of the project:
 - a. Plumbing Permit Wichard Field-State of Michigan 4260-348-4386
 - b. Electrical Permit Gord Bosch -616/396-1448
 - c. Mechanical Permit Michigan Township Services- 1-800-626-5964 or 269/673-3239
 - d. Earth Change Permit Issued by the Allegan County Health Department (269) 673-5415-4044/Johnson. A permit is required whenever an earth change will take place within 500 feet of a lake/stream/waterway and/or disturbs one or more acres of land.
- 8. Payment of applicable fees.

If the project is in compliance with the Casco Township Zoning Ordinance, plan review is approved, and the above requirements are submitted, a building permit will be issued. Permits may take up to 10 days depending upon the complexity of the project. Failure to obtain permits prior to construction may result in fines or the removal of the structure. An occupancy permit will be issued prior to use or occupancy of the building and after all final inspections are completed and approved by each individual inspector.

CASCO TOWNSHIP BUILDING PERMIT APPLICATION 7104 107th Ave., South Haven, MI 49090(Ph.-269/637-4441;Fax- 269/639-1991) Permit #_____

LOCATION OF BUILDING:			T OTHER !	
Address:			Zoning Distric	::
Subdivision: Section:	Permanent Parcel #	:0302-	Lot Siz	re:
OWNER OR LESSEE:				
Name:		Telephone:		position
Address:	City:	State:	Zin:	
ARCHITECT OR ENGINEER:				······
Name:	Telephone:	Fax#:	License #:	
Address:	City:	State:	Zip:	
CONTRACTOR:				
Name:	Telephone:	Fax #:	License #:	unimed
Address:	City:	State:	Zip:	
Employee I. D. # or reason for exemption	1:			
Workman Comp Insurance Carrier or re-				
MESC Employer # or reason for exempt				
TYPE OF IMPROVEMENT:		***************************************	Total trade to the second of t	
New Building: Addition:	Alteration:	Repair: Demoi	ition: Me	oving:
Single Wide: Double Wide:			at the or a man and a man	
DRODOGED LIGE.				
PROPOSED USE: Single Family: Two or More#	of Units: Gara	nge: Camort:	Storage:	
Other(Specify):				
Sewage Disposal: Private Wa	ter Supply: Private	Dimensions: Widt	hLength	Area:
Public	Public	Heigl	at# of Stories	
VALUE OF IMPROVEMENT: \$		PERMIT FEE: \$		
CONTRACTORS AFFIDAVIT		HOMEOV		ЛТ
I hereby certify that the proposed work is authorized	by the owner of	I hereby certify that the work de	seribed on this permit appli	cation shall be done by
record and I have been authorized by the owner to n as his authorized agent, and we agree to conform to		myself in my own single family	dwelling in which I am livi	ag or are about to occupy.
the State of Michigan. All information is accurate to		All work shall be done in accordance or covered up until it has	nce with all applicable code been inspected and approve	s and shall not be
(Sec. 23A of the State Construction Code Act of 1	972, Act 230 of the Public	Official. I will assume responsibil	ity to arrange for necessary	inspections.
Acts of 1972, being Sec. 125.1523A of the Michigan a person from conspiring to circumvent the licensing				
relating to persons who are to perform work on a res residential structure. Violators of Sec. 23A are subje	idential building or			
Signad.		Si		
Signed:		Signed:		
Date:	-	Date:		
Checklist: Sewage Permit DEQ	Permit: Road Co	omm:Application:_	Plans:	Well Permit
Site Plan: Plan Review	v:Zoning;	Energy Code:I	and Split: Ear	th Change:
Remarks:				
	ride site plan on reverse si	de or on separate sheet)		

Casco Township Zoning Compliance Permit Application

7104 107th Ave, South Haven MI 49090 269-637-4441 Zoning Administrator Tasha Smalley 1-800-626-5964 mtsallegan@frontier.com 1. Required Information: Job address: Property Tax No: 0302-Owner Name: Owner mailing address: _____ Owner phone number: Applicant (if different than owner) name: Applicant address: Applicant phone number: Email ____ Describe project & use: ____ (i.e. house, addition, pole barn, deck, shed, pool, fence, commercial, etc.) 2. Site Plan: Use the other side of this sheet or a separate sheet to draw a site plan showing all the following items: 1. Dimension of the lot (all sides) 2. Location, distance to lot lines, of all exiting and proposed structures [Front setback is measured from the right-of-way not the center of the road 3. Dimensions and distance between all existing and proposed structures 4. Location of roads, including center line and right-of-way 5. Location of lakes, streams, creek, pond, county drain within 500 feet 6. A north arrow indicating direction of north 3. Proof of ownership: deed, land contract, tax bill, etc **4. Fee:** \$50.00 Note: A site inspection may be required prior to approval and at end of project. Owner/Applicant Signature Date ▶ Submit completed form, site plan, proof of ownership with building permit application. Zoning fee to be paid with building permit fee. ▶ If Building Permit not required: MTS 111 Grand St, Allegan MI 49010 with \$50 fee payable to Casco Township. OFFICE USE ONLY required regulation Zoning District: Front:____ Water ___ Rear: ____ sides: ____ Min lot width: _____ Min lot area: _____ Max lot cover: ____ Max Bldg height: _____ Min living area: ____ Min Dwell width____ Zoning Administrator Approval Signature Approval Date Approval Condition(s):

Zoning Administrator Denial Signature Denial Date

Application denied: reason(s)