



Charter Township of Orion Building Department
2323 Joslyn Road, Lake Orion, MI 48360
Phone: 248-391-0304 Ext. 6000

BUILDING PERMIT APPLICATION

** 2 sets of plans REQUIRED when submitting this application.*

I. JOB LOCATION:			
Street Address:			
City:	State:	Zip Code:	
Subdivision:	Lot #:	Sidwell #:	
Zoning:	Estimated Cost of Construction:		
			Square Footage:

II. APPLICANT INFORMATION: Homeowner <input type="checkbox"/> Contractor <input type="checkbox"/> Engineer <input type="checkbox"/> Architect <input type="checkbox"/>			
Contact Name:		Phone #:	
Email Address:			

III. OWNER		
Name:		Phone #:
Address:	State:	Zip Code:
Email Address:		

IV. ARCHITECT/ENGINEER		
Company Name:		
Name:		Phone #:
Address:	State:	Zip Code:
License #:		Expiration Date:
Email Address:		

V. CONTRACTOR		
Company Name:		
Builder's License Number:		Expiration Date:
Name:		Phone #:
Address:	State:	Zip Code:
Email Address:		

VI. PROPOSED USE OF BUILDING:			
A. RESIDENTIAL			
Single Family <input type="checkbox"/>	Multi-Family (# of Units _____) <input type="checkbox"/>	Attached Garage <input type="checkbox"/>	Detached Accessory Building <input type="checkbox"/>
Other (Specify) _____ (New Residential Only: # of Bedrooms _____ # of Bathrooms - Full _____ Partial _____)			
Homeowner's Association Affidavit (IF applicable)			
B. NON-RESIDENTIAL			
Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>	Medical <input type="checkbox"/>	Office/Professional <input type="checkbox"/> Cell Tower <input type="checkbox"/>
Store/Mercantile <input type="checkbox"/>	Sign <input type="checkbox"/>	Other (Specify) _____ <input type="checkbox"/>	

VII. PROJECT DESCRIPTION:			

VIII. TYPE OF PERMIT:			
New Building <input type="checkbox"/>	Alteration <input type="checkbox"/>	Mobile Home Set-Up <input type="checkbox"/>	Other Specify _____ <input type="checkbox"/>
Repair <input type="checkbox"/>	Deck <input type="checkbox"/>	Foundation Only <input type="checkbox"/>	Demolition <input type="checkbox"/>
In-ground Pool <input type="checkbox"/>	Above-ground Pool <input type="checkbox"/>	Detached Accessory Structure <input type="checkbox"/>	
Addition/Accessory Structure <input type="checkbox"/>			

IX. ENVIRONMENTAL:			
A. PRINCIPAL TYPE OF SEWAGE DISPOSAL:		Public <input type="checkbox"/>	Septic System <input type="checkbox"/>
B. PRINCIPAL TYPE OF WATER SUPPLY:		Public <input type="checkbox"/>	Private Well <input type="checkbox"/>

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, 1972 PA 230, MCL 125.15239, 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 subject to civil fines.

Signature of Applicant: _____ Date: _____

Print Name: _____

NOTE: COMMERCIAL (NEW/EXISTING) AND NEW RESIDENTIAL APPLICANTS
PLEASE CONTACT ORION TOWNSHIP PUBLIC WORKS FOR WATER & SEWER FEES.
WATER/SEWER FEES MUST BE PAID PRIOR TO ISSUING YOUR BUILDING PERMIT.
(248) 391-0304 EXT. 8500

OFFICE USE ONLY			
Fees		Information	
Registration	_____	Type	_____
Application	_____	Use Group	_____
Plan Review	_____	Square Footage	_____
Permit Fees	_____		
Online Fee	_____		
TOTAL FEES	_____	PROJECT #:	_____
		PROJECT TYPE:	_____
		PERMIT #:	_____