



Building Department
 6000 Middlebelt Road, Garden City MI 48135
 734.793.1650 Fax 734.793.1651
 24 hour inspection line 734.793.1656

For Department Use Only		Permit # _____
Permit Fee _____	Plan Review _____	
ICC Review _____	Bond _____	

ZONING PERMIT APPLICATION

DATE _____ JOB ADDRESS _____

1. Owner's Information

Name _____ Address _____
 City _____ State _____ Zip Code _____ Phone _____
 Email Address _____

2. Contractor's Information

Name _____ Address _____
 City _____ State _____ Zip Code _____ Phone _____
 Email Address _____
 State/Local License Number _____ Federal Employer ID/Exemption _____
 Worker's Compensation Insurance Carrier or reason for exemption _____
 MESC Employer Number or reason for exemptions _____

3. Type of Work/Fee Schedule

TYPE OF WORK	# INSTALLED	FEE FOR EACH	TOTAL
Administration fee (non-refundable)	1	\$ 45.00	\$ 45.00
Plan Review Fee (non-refundable)	1	\$ 40.00	\$ 40.00
Fences		\$ 55.00	
Collection Box		\$ 75.00	
Detached Accessory Structures*			
Less than 400 SQFT requires zoning permit		\$ 50.00	
Decks – Less than 200 SQFT		\$ 50.00	
*Any structure over 400 SQFT requires a <u>Building Permit</u>			
INSPECTION/REGISTRATION FEES			
Re-inspection		\$ 50.00	
Annual registration fee		\$ 30.00	
		TOTAL COST =	

*Note: All refunds subject to 25% service fee

**Administrative and plan review fees (\$40.00 EACH) due at time of submission. Permit fee(s) may be paid once plans are approved.

4. Plan Review Required

See page three (3) for the submission requirement for each scope of work. Please note, no applications will be accepted without ALL the required materials.

Section 23a of the State construction code act, P.A. 230 of 1972, as amended, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirement of this State relating in persons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.

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/her authorized agent, and we agree to conform to all applicable laws of the City of Garden City and the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

PERMIT IS GOOD FOR 6 MONTHS. 24 hour notice required to schedule inspections

Applicant's Signature _____ Contractor Property Owner _____ Date _____

For Department Use: Per all City Codes and Ordinances; the adopted Michigan Residential Code, and the adopted Michigan Building Code.

Approved by _____ Date _____