

Building Permit Application
City of Roseville, Building Department
29777 Gratiot, P.O. Box 290, Roseville, Michigan 48066
Phone (586) 445-5450 Fax (586) 445-5402

Date Applied _____

Job Location _____ PP# _____

Job Location Business Name _____

Property Owner _____

Address _____ City _____ State _____ Zip _____

Phone Number _____ Date of Birth _____ Driver's License Number _____

Contractor _____

Address _____ City _____ State _____ Zip _____

Phone Number _____ Ext. _____ Fax Number _____

Licensee _____ Date of Birth _____ Driver's License Number _____

State License Number _____ Federal ID Number _____

Applicant's Signature _____

<u>Description of Work</u>

Size: Length _____

Width _____

Total Square Feet _____

Est. Construction Cost \$ _____

Office Use Only

Use Group _____ Construction Type _____ Occupancy Load _____ Zoning _____

Sprinkler Required (Y) _____ (N) _____ Sprinkler Installed (Y) _____ (N) _____ Parking Req. _____

Approved (Y) _____ (N) _____

By _____

Date _____

Issued By _____

Date _____

Permit Fee \$ _____

Improvement Guarantee \$ _____

Soil Erosion \$ _____

Engineering \$ _____

Miscellaneous \$ _____

Total \$ _____

Improvement Guarantee supplied by: Contractor _____ Owner _____

Permit # _____

Receipt # _____

Remarks: _____