



RESIDENTIAL BUILDING PERMIT PROCEDURE

The following **ITEMS ARE REQUIRED** when submitting a building permit.

1. **Application** forms **must be COMPLETELY** filled in.
2. **Site plans or Survey** must show all the distances from the building project to the lot lines, right of ways, and other structures.
3. **Blue prints must include** front, back, sides, foundation and all floor areas.
4. **Section details** (cut through the building) must show details including stair area details.
5. **Truss** drawings or truss layout drawings.
6. **Energy Code** form to be completed: we have the forms.
7. **Well and septic** approvals by Kent County Health Department only when the new home is not serviced by City Water & Sewer. 336-3512
8. **Driveway permit** from Kentwood Engineering Department – 554-0737.
9. **Earth Change Permit** from Kentwood Engineering Department – 554-0737.
10. **Receipt** from Grand Rapids for water and sewer hookup fees. When the property is located in the Grand Rapids Water/Sewer System area – 456-3041.
11. **Receipt** from our water department when the property is located in the Wyoming's water/sewer system - 554-0734 .

The building permit application will be reviewed for compliance with Michigan 2003 Building Code and City ordinances before it is written for the applicant.

Respectfully:

THE INSPECTIONS DEPARTMENT
554-0700



APPLICATION FOR BUILDING PERMIT

City of Kentwood
 4900 Breton Ave SE • P.O. Box 8848
 Kentwood, MI 49518-8848
 (616) 554-0700

IMPORTANT: Applicant MUST complete all items

I. Building Location

Address (Street No., Name)		Suite / Space No.
Parcel Number	Lot #	

Title of Project:		Contact Person	
		Name:	
		Phone:	
	Name	Mailing Address - Number, Street, City, State, Zip Code	Telephone Numbers
Owner or Lessee			Phone:
			Fax:
Architect or Engineer			Phone:
			Fax:
Contractor			Phone:
			Fax:

Builder license No. / Exp. Date

Describe in detail what you are proposing to do (i.e. New Building, office, additions, new home, remodel deck, pool, garage, demolition, etc.):

Style of Building _____ Square Feet _____ # of Bedrooms _____ # of Bathrooms _____ Garage's Sq. Ft. _____

State the TOTAL cost of the improvement, including the cost of excavation, building, plumbing, and electrical, mechanical and architectural fees	(Omit Cents) \$
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I am the owner (or designated agent of the owner) of the property on which this proposed project is located and the plans, specifications, and the information provided in the application is true and correct to the best of my knowledge and belief.

Typed / Printed Name	Signature of Applicant	Application Date
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*****HOMEOWNER APPLICATION - SELF CONTRACTING:**

Name	Phone Number
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Home herewith declares that the work is to be done by me for my own use and occupancy as the owner of the above described property. I also certify that I am exempt from the requirements of the Public Acts of 1967, numbered 153.

"Section 23A of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being section 125 1523A of the Michigan Compiled Laws, 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 subjected to civil fines."

I have received information regarding electrical, mechanical, and plumbing rules. I declare that my minimum period of occupancy will be one full year.

Homeowner Signature	Date
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Application must be fully completed; we do reserve the right to ask for field corrections as needed per code requirements.
 Additional permits that may be required: Electrical, Plumbing, Mechanical, Soil Erosion, Water, Sewer, Right of Way, Driveway, and Sidewalk.

Construction Type:	Minimum Opening:	Use Group:
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NO WORK IS TO BEGIN UNTIL THE BUILDING PERMIT HAS BEEN ISSUED.

MICHIGAN UNIFORM ENERGY CODE COMPLIANCE FORM
Part 10 of the State Construction Code
R408.31061 ET.SEQ

JOB ADDRESS: _____ **MUNICIPALITY:** _____

BUILDER: _____ **SUBMITTED BY:** _____

BUSINESS PHONE: _____

Check Method of Compliance: Prescriptive: _____ Systems Approach: _____

NOTE: Systems Approach method requires an energy analysis comparison report (ARF 1086.3)

1. Gross area of exterior walls in square feet: _____
2. Square feet of fenestration openings: _____
3. Percent of fenestration exterior wall opening: _____
4. If fenestration openings exceed 20% of gross exterior wall area, indicate the specific trade-off option that will be used for compliance. (R408.31083) _____

5. Indicate the percentage of exposed basement wall area (sq. ft. of exposed basement wall divided by sq. ft. of gross area of exterior wall) _____

6. Indicate the R-value and type of insulation proposed for use on basement walls to bring exposure down to 7% of the gross area of exterior walls (R408.31081) _____

7. Attach documentation for certified or labeled R-values of all pre-manufactured fenestration products including windows, doors and skylights. (R408.31071)

8. Indicate the proposed insulation R-value for each component.

Walls: _____ Slab on grade floors: _____ Floors over unconditioned space: _____
(R408.31074) R408.31078) (R408.31077)

Ceiling/Roof: _____ Crawl space walls: _____
(R408.31076) (R408.31079)

9. I agree that at the time of inspection, the insulation installer shall provide a certificate for any blown-in or sprayed insulation that lists the following information:
 - a. The initial thickness
 - b. The settled thickness
 - c. The coverage area
 - d. The number of bags used

Signature _____ Date _____



DRIVEWAY PERMIT

City of Kentwood Engineering Department
 4900 Breton Ave SE • P.O. Box 8848
 Kentwood, MI 49518-8848
 Phone: (616) 554-0736 Fax: (616) 698-7118

Permit No.: _____
 Application Date: _____
 Effective Date: _____
 Expiration Date: _____

Contractor & Homeowner Information

Property Address		Lot Number	Subdivision - Plat Name	
Homeowner Name			PP No. 41-18-	
Homeowner Address (Street Name & No.)			Homeowner Phone Number	
City	State	Zip		
Contractor Name			Contractors Phone	
Contractor Address		Contractors Fax	Contractors Cell	
City	State		Zip	

(Miss Dig) 72 hours before digging

Call 1-800-482-7171 (toll free)

Activity	Work Conditions
Driveway Type [] Residential [] Commercial Pavement Type _____ Number Driveway Openings _____ Private Road _____ Sidewalk Linear Feet _____ ft Establish Grade _____ Requested Staking Date _____ Curb & Gutter _____ Culvert Required _____ Culvert Type _____ Number of Flared End Sections _____ Culvert Length _____ ft	<input type="checkbox"/> All work to be done in accordance with the City of Kentwood engineering plan. <input checked="" type="checkbox"/> City of Kentwood Engineering Department to be notified 48 hours in advance of work. <input type="checkbox"/> Forms to be Checked before concrete is poured. <input type="checkbox"/> Complete restoration of roadway including blacktop to be accomplished same day as opening. <input type="checkbox"/> City of Kentwood to place culvert in ditch. Owner to fill over pipe and build driveway. <input type="checkbox"/> Work to be completed as per attached application. Proper traffic signing to be used.

It is understood that all activity resulting from granting of this permit is to be in accordance with the City of Kentwood specification and conditions either checked or written or stated in the City of Kentwood specifications and conditions for highway permits.

Special Provisions _____

Comments _____

Charges _____

CALL FOR INSPECTIONS PRIOR TO PLACING CONCRETE

Permit Fee Overridden? _____ Issued By _____ Total Permit Fee _____

Payment Method _____ Reference _____ Account _____



PERMIT APPLICATION for Part 91 SOIL EROSION AND SEDIMENTATION CONTROL

City of Kentwood
4900 Breton Ave SE
PO Box 8848
Kentwood, MI 49518-8848

Office Use Only
Permit Number:
Date Issued:
Expiration Date:
Minimum Opening:

1. APPLICANT (please check if applicant is the landowner or designated agent*)

Name Landowner _____ Designated Agent _____	
Owner	Contractor
Address (Street Name & No.)	Address (Street Name & No.)
City, State & Zip Code	City, State & Zip Code
Owner Phone Number & Fax	Contractors Phone Number & Fax

2. LOCATION

Section:	Town: 6N	Range: 11W	City: Kentwood	County: Kent	Subdivision:	Lot #
Property Address					Parcel Number	
					41-18-	

3. PROPOSED EARTH CHANGE

Project Type: Residential (single family or duplex home on single lot) _____ Plat Development _____ Commercial _____ Other _____			
Describe Project:	Soil Type		Size of Earth Change (acres or square feet)
	Clay []	Sand []	
Name of and Distance to Nearest lake, Stream, or Drain		Date Project to Start	Date Project to be Completed

4. SOIL EROSION AND SEDIMENTATION CONTROL PLAN (Refer to Rule 323.1703)

Note: 2 Complete set of plans must be attached	Estimated Cost of Erosion and Sediment Control
	Plan Preparer's Name and Phone Number

5. PARTIES RESPONSIBLE FOR EARTH CHANGE

Name	Address (Street Name & No.)
City, State & Zip Code	Phone Number & Fax
Name of Individual "ON SITE" Responsible for Earth Change	Phone Number

6. PERFORMANCE DEPOSIT (If required by the permitting agency)

\$5,000 Soil Erosion	Surety Bond _____	Check _____	Irrevocable Letter of Credit _____	Not applicable _____
\$30,000 Stormwater	Surety Bond _____	Check _____	Irrevocable Letter of Credit _____	Not applicable _____
Name of Surety Company				
Address	City	State	Zip Code	Phone Number

I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 91, Soil Erosion and Sedimentation Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, applicable local ordinances, and the documents accompanying this application.

Landowner's Signature	Print Name	Date
Designated Agent's Signature*	Print Name	Date

* Designated agent must have a written statement from the landowner authorizing him/her to secure a permit in the landowner's name.