



Charter Township of Orion - Building Department

2323 Joslyn Rd. Lake Orion, MI 48360

Phone: (248) 391-0304, ext. 6000

www.oriontownship.org

BUILDING PERMIT APPLICATION for COMMERCIAL PROPERTIES

*** REQUIREMENTS WHEN SUBMITTING:** Completed Application, 2 sets of Plans (Minimum Size: 24x36"), Structural Cals., Change of Occupancy Application (if new business), Roof Load Data Sheet (if applicable) & Plot Plan (if applicable). *** Illegible or Incomplete Applications will NOT be processed * - This application & plans MUST be submitted in-person or by mail - can NOT be applied through BSAonline or email.**

I. JOBSITE LOCATION			
*ADDRESS & SUITE #:	CITY:	STATE:	ZIP CODE:
	Lake Orion	MI	
*PLAZA NAME:			
*NAME OF BUSINESS:			
	<input type="checkbox"/> New Business	<input type="checkbox"/> Existing Business	
*SIDWELL/PARCEL ID #:			ZONING DISTRICT:
0 - 09 - - -			

Office Use Only

Project #: _____

Permit #: PB _____ - _____

Clerk: _____

Township Village

II. BUILDING/PROJECT INFORMATION

Check all that apply:

*Type of Project	*Project Area (for Phased Projects Only)	*Suppression System	*Fire Alarm System
<input type="checkbox"/> New Building	<input type="checkbox"/> New	<input type="checkbox"/> NFPA-13	<input type="checkbox"/> Manual
<input type="checkbox"/> Addition	<input type="checkbox"/> Existing	<input type="checkbox"/> NFPA-13R	<input type="checkbox"/> Automatic Detection
<input type="checkbox"/> Alteration	<input type="checkbox"/> Shell	<input type="checkbox"/> NFPA-13D	<input type="checkbox"/> None
<input type="checkbox"/> Interior Finish	<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Limited Area	
<input type="checkbox"/> Sign	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Range hood	
<input type="checkbox"/> Roof		<input type="checkbox"/> None	
<input type="checkbox"/> Misc. _____			

CONSTRUCTION DETAILS:

- Estimated Cost of Construction: *\$ _____
- Square Footage of Project: * _____ sq. ft.
- Occupant Load: _____

* Detailed Project Description:

III. APPLICANT INFORMATION

*INDICATE WHO THE APPLICANT IS: <input type="checkbox"/> Contractor <input type="checkbox"/> Property Owner <input type="checkbox"/> Other - _____	*NAME OF APPLICANT:		
	*PROPERTY OWNER NAME:		
*ADDRESS:	CITY:	STATE:	ZIP CODE:
*PHONE NUMBER:	*EMAIL ADDRESS:		

IV. CONTRACTOR INFORMATION			
*NAME OF COMPANY:			
*ADDRESS:	CITY:	STATE:	ZIP CODE:
*PHONE NUMBER: () -	*EMAIL ADDRESS (associated with BSA):		
*NAME OF LICENSEE:	*BUILDER'S LICENSE #:	*LICENSE EXPIRATION DATE:	

V. ARCHITECT/ENGINEER INFORMATION			
*NAME OF COMPANY:			
*ADDRESS:	CITY:	STATE:	ZIP CODE:
*PHONE NUMBER: () -	*EMAIL ADDRESS (associated with BSA):		
*NAME OF ENGINEER/ARCHITECT:	*ENGINEER'S LICENSE #:	*LICENSE EXPIRATION DATE:	

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.

* Physical Signature of Applicant: _____

* Print Name: _____ Date: _____

IMPORTANT NOTES:
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
Trade Permits (Electrical, Mechanical, Plumbing): Electrical, Mechanical, Plumbing permits (if needed) are NOT part of this Building permit and will need to be applied for individually.
Expiration of Permit: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work.

FOR TOWNSHIP USE ONLY

PROJECT # and DESCRIPTION:	
BUILDING INFORMATION (FOR PLAN REVIEWER):	BUILDING PERMIT FEES:
Type	Application
Use Group	Plan Review
Total Square Footage of Project	Permit Fees
House	Registration
Garage	Online
Finish Basement	Revision
	TOTAL FEES