Date		/	
BAT	H TOW	/NSHIP	

Signed:

## **ACCESSORY BUILDING PERMIT**

 Bath Township Building and Zoning PO Box 247, (14480 Webster Rd) Bath, MI 48808

Bath, MI 48808 Phone: 517-641-4238 Fax: 517-641-4170

Date: \_

Job Address:	Property Tax Id No					
Owner						
Address:						
Basic Dimensions:ft x						
Type of Construction		_		Office	Use Only	
PLEASE FILL IN OR CHECK THE	APPROPRIATE SPACES E	BELOW	<b>/</b> :	Zoning District		
Sq. ft. shed Sq. ft. pole building Sq. ft. porch on pole building Sq. ft. pool Sq. ft. deck for pool	cement slab & thicke cement slab (3 ½" – rafters trusses metal roof	4")	9	Use Group Type of Construction_ Permit Determinant		
Sq. ft. unattached frame garage Sq. ft. storage building & foundatio Sq. ft. demolition Lineal ft. fence Type of fence	asphalt shingles metal exterior aluminum/vinyl exter brick exterior block exterior	rior		COST OF PERMIT:	\$	
Height of fence Other	wood exterior Number of windows Number of garage do	oors		By: Building  Make checks payable	Official e to: BATH Township	
Contractor			Phone	Fax		
Fax	# 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Cell	January Company of the Company of th	111	
Address			City & State Zip Code		Zip Code	
Federal D No/Social Security No.		MESC E	Employer No.			
License No.	Expiration Date Worke		r's Disability Compensation Carrier			
EMAIL						
If exempt from any of the above, explain here:						
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 Complied 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 subject to civil fines.						
HOMEOWNER'S AFFIDAVIT and SIGNATURE  I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for necessary and timely inspections.						
Signed:				Date:		
AGENT'S/CONTRACTORS AFFIDAV  I hereby certify that the proposed work is au his authorized agent.	IT and SIGNATURE thorized by the owner of record and	I have bee	en authorized by	the owner to make this	application as	

## ACCESSORY BUILDING PERMIT SECOND PAGE

## **LOT DIAGRAM**

	Job Address:	
Address:		
ax I.D.:		
PLEASE PROVIDE AL	L OF THE FOLLOWING:	
<ol> <li>Draw lot lines in feet</li> <li>Label street</li> <li>Draw existing structures</li> </ol>	<ul><li>(4) Draw proposed construction</li><li>(5) Show dimensions of all buildings</li><li>(6) Show distance from all sides of building to sidelines</li></ul>	<ul><li>(7) Draw lakes, streams, and wet lands within 500 fee</li><li>(8) Contractor/owner will stake 2 adjacent lot lines</li></ul>
	× ×	
Signature of Applicant,	/Agent	y