

# BATH CHARTER TOWNSHIP

## Public Checklist

14480 Webster Road, P O Box 247, Bath, Michigan 48808

Phone: 517-641-4238 Fax: 517-641-4170

Permit Application (Job Address) \_\_\_\_\_

Owner: \_\_\_\_\_ Contractor: \_\_\_\_\_

**Before a Building Permit may be issued, all of the following documentation must be submitted or justified as (N/A) not applicable. Please indicated by a check mark the items which are enclosed with the permit application.**

- \_\_\_1. **THREE (3) SETS OF BLUE PRINTS and/or DRAWINGS** shall be submitted to this Department for plan review in accordance with the 2015 State Construction Code.
- \_\_\_2. **PLOT PLAN/SITE PLAN** shall be provided on the *back of the first page* of the building permit application. This site plan shall include all pertinent information that is outlined within the form. Areas having local zoning shall submit a copy of the Zoning Compliance to this Department
- \_\_\_3. **PROOF OF OWNERSHIP** shall be submitted for all building projects in accordance with the Bath Township Ordinance. This may be either a *Recorded Land Contract or a Recorded Deed* for the subject parcel.
- \_\_\_4. Provide the **PROPERTY CODE/TAX IDENTIFICATION NUMBER** for the subject parcel.
- \_\_\_5. **ZONING PERMIT.**
- \_\_\_6. A **DRIVEWAY PERMIT** from the County Road Commission shall be submitted along with the permit application for all new driveway installations.
- \_\_\_7. **SANITATION & WATER SUPPLY PERMITS** (County Health Department or Permits from Bath Township).  
**\*\*\*SEE BELOW\*\*\***
- \_\_\_8. A **SOIL EROSION PERMIT** may be needed. The Park Lake Area and downtown area need Soil Erosion permits and all properties located around County drains or wetlands require Soil Erosion Permits. Check with Clinton County Community Development for Permit Or Exemption.
- \_\_\_9. The **ENERGY CODE** (insulation) of all building shall be designed in accordance with Michigan Energy Code 2015. Documentation shall be submitted for new construction demonstrating compliance.
- \_\_\_10. **HOUSE NUMBERS** shall be included on the permit application for all projects. New house numbers will be issued by the Clinton County Equalization Department upon request.

\_\_\_yes \_\_\_no Is the subject parcel located in a wetland or floodplain. Where these conditions exist, a building permit shall not be issued without approval from the Michigan Department of Environmental Quality.

\_\_\_yes \_\_\_no Is one acre or more of soil being eroded in the construction process.

\_\_\_yes \_\_\_no Where an earth change encompasses 5 acres or more in area, a **STORM WATER DISCHARGE** permit shall be obtained from the Michigan Department of Environmental Quality. No site work shall begin until a valid permit has been issued by this Department.

**It is the legal responsibility of the applicant to post the address and call for all required inspections as indicated on the Plan Review. No Electrical, Mechanical, Plumbing or Structural components shall be concealed until approval has been granted. *Separate permits shall be required for all Electrical, Mechanical, and Plumbing installations through this Department.***

**\*\*\*Note: Final sewer connection must be approved by Southern Clinton County Municipal Utilities Authority (SCCMUA) before a Certificate of Occupancy will be issued. \*\*\***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**PROOF OF OWNERSHIP**

Register of Deeds-----989-224-5270  
100 State St. Suite #2500  
St. Johns, MI 48879

**SEWER PERMIT**

Southern Clinton County Municipal Sewer Authority-----517-669-8311  
3671 W. Herbison Rd.  
DeWitt, MI 48820

**ON-SITE SEWAGE DISPOSAL PERMIT**

Mid-Michigan Health Department -----989-224-2195  
306 Elm St.  
St. Johns, MI 48879

**DRIVEWAY PERMIT**

Clinton County Road Commission -----989-224-3274  
3536 S. US-27  
St. Johns, MI 48879

**SOIL EROSION AND SEDIMENTATION CONTROL**

Clinton County Community Development-----989-224-5248  
100 State St. Suite #1300  
St. Johns, MI 48879  
[hoarda@clinton-county.org](mailto:hoarda@clinton-county.org)

**HOUSE NUMBERING**

Equalization Department -----989-224-5170  
100 State St. Suite #1200  
St. Johns, MI 48879

**ELECTRICAL PERMIT**

**MECHANICAL PERMIT**

**PLUMBING PERMIT**

Bath Charter Township Building and Zoning -----517-641-4238  
14480 Webster Rd. – PO Box 247  
Bath, MI 48808  
Office Hours: 1:00-5:00 Monday, Tuesday, Thursday & Friday – Wednesday 8:00-5:00  
Inspector’s Office Hours: 8:00-9:00 Monday through Friday

**MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY (M-DEQ)**

Lansing, MI 48909-7742 -----517-243-6956  
website: [www.michigan.gov/deg](http://www.michigan.gov/deg)

Wetlands -----517-284-5531

# ACCESSORY BUILDING PERMIT

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**BATH TOWNSHIP**

Bath Township Building and Zoning  
 PO Box 247, (14480 Webster Rd)  
 Bath, MI 48808  
 Phone: 517-641-4238  
 Fax: 517-641-4170

Permit # \_\_\_\_\_  
**Accessory/detached structures and demolition**

Job Address: \_\_\_\_\_ Property Tax Id No. \_\_\_\_\_

Owner \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ E-mail address \_\_\_\_\_

Basic Dimensions: \_\_\_\_\_ ft x \_\_\_\_\_ ft. No. of floors \_\_\_\_\_ Building Height \_\_\_\_\_

Type of Construction \_\_\_\_\_

**PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:**

- |   |   |
|---|---|
| <input type="checkbox"/> Sq. ft. shed<br><input type="checkbox"/> Sq. ft. pole building<br><input type="checkbox"/> Sq. ft. porch on pole building<br><input type="checkbox"/> Sq. ft. pool<br><input type="checkbox"/> Sq. ft. deck for pool<br><input type="checkbox"/> Sq. ft. unattached frame garage<br><input type="checkbox"/> Sq. ft. storage building & foundation<br><input type="checkbox"/> Sq. ft. demolition<br><input type="checkbox"/> Lineal ft. fence<br><input type="checkbox"/> _____ Type of fence<br><input type="checkbox"/> _____ Height of fence<br><input type="checkbox"/> Other _____<br>_____<br>_____ | <input type="checkbox"/> cement slab & thickened edge<br><input type="checkbox"/> cement slab (3 1/2" - 4")<br><input type="checkbox"/> rafters _____" O.C.<br><input type="checkbox"/> trusses _____" O.C.<br><input type="checkbox"/> metal roof<br><input type="checkbox"/> asphalt shingles<br><input type="checkbox"/> metal exterior<br><input type="checkbox"/> aluminum/vinyl exterior<br><input type="checkbox"/> brick exterior<br><input type="checkbox"/> block exterior<br><input type="checkbox"/> wood exterior<br><input type="checkbox"/> Number of windows<br><input type="checkbox"/> Number of garage doors |
|---|---|

**Office Use Only**

Zoning District \_\_\_\_\_  
 Use Group \_\_\_\_\_  
 Type of Construction \_\_\_\_\_  
 Permit Determinant \_\_\_\_\_

**COST OF PERMIT: \$** \_\_\_\_\_

**By:** \_\_\_\_\_  
 Building Official

Make checks payable to: **BATH Township**

Contractor		Phone	Fax
Fax		Cell	
Address		City & State	Zip Code
Federal D No/Social Security No.		MESC Employer No.	
License No.	Expiration Date	Worker'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 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 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 AFFIDAVIT and SIGNATURE**

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**COMPLETE INFORMATION ON SECOND PAGE**

**ACCESSORY BUILDING PERMIT** SECOND PAGE  
**LOT DIAGRAM**

Owner: \_\_\_\_\_ Job Address: \_\_\_\_\_

Address: \_\_\_\_\_

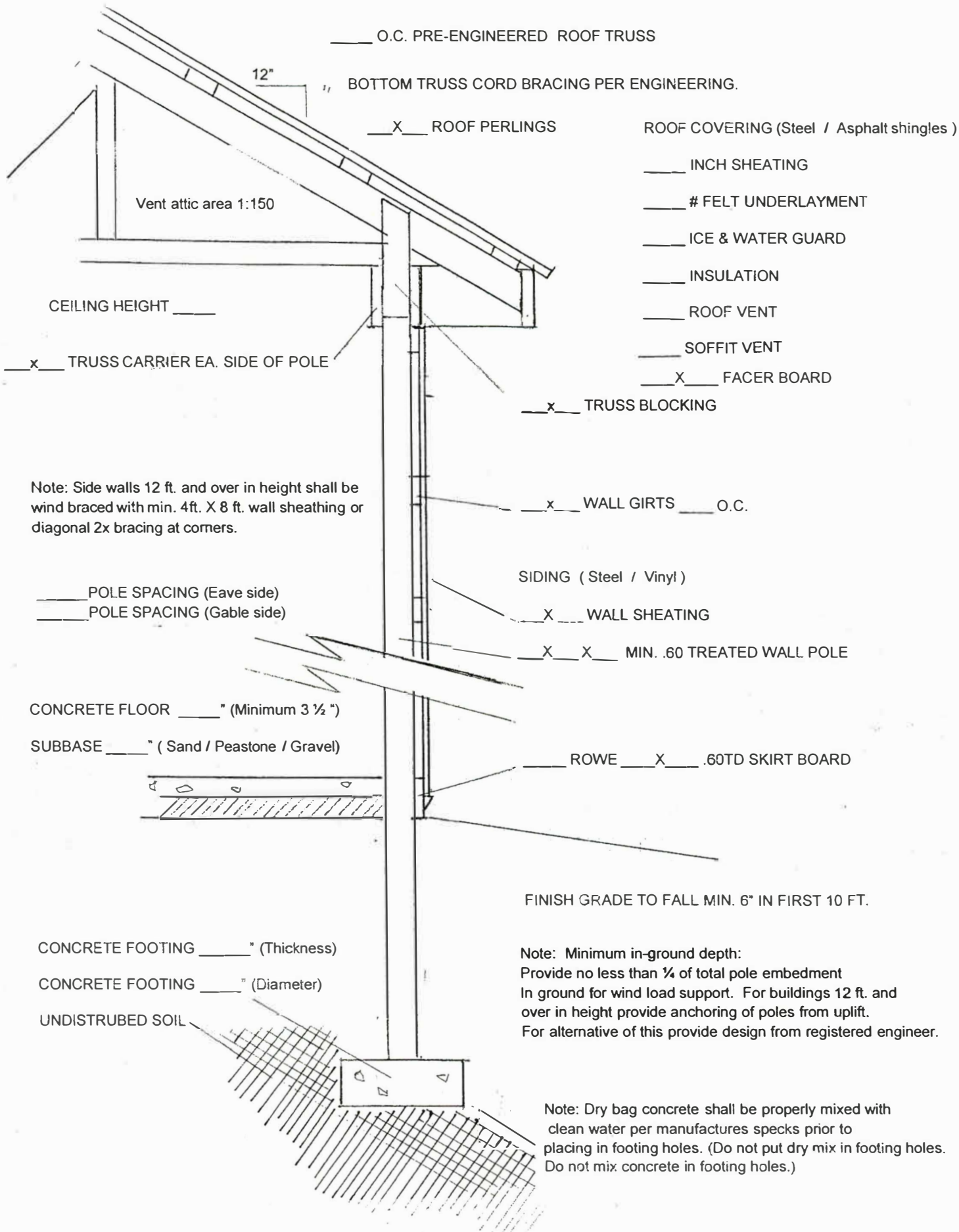
Tax I.D.: \_\_\_\_\_

**PLEASE PROVIDE ALL OF THE FOLLOWING:**

- (1) Draw lot lines in feet
- (2) Label street
- (3) Draw existing structures
- (4) Draw proposed construction
- (5) Show dimensions of all buildings
- (6) Show distance from all sides of building to sidelines
- (7) Draw lakes, streams, and wet lands within 500 feet
- (8) Contractor/owner will stake 2 adjacent lot lines

Signature of Applicant/Agent \_\_\_\_\_

Date \_\_\_\_\_



\_\_\_ O.C. PRE-ENGINEERED ROOF TRUSS

12" \_\_\_ BOTTOM TRUSS CORD BRACING PER ENGINEERING.

\_\_\_ X \_\_\_ ROOF PERLINGS

ROOF COVERING (Steel / Asphalt shingles)

\_\_\_ INCH SHEATHING

\_\_\_ # FELT UNDERLAYMENT

\_\_\_ ICE & WATER GUARD

\_\_\_ INSULATION

\_\_\_ ROOF VENT

\_\_\_ SOFFIT VENT

\_\_\_ X \_\_\_ FACER BOARD

\_\_\_ x \_\_\_ TRUSS BLOCKING

Vent attic area 1:150

CEILING HEIGHT \_\_\_

\_\_\_ x \_\_\_ TRUSS CARRIER EA. SIDE OF POLE

Note: Side walls 12 ft. and over in height shall be wind braced with min. 4ft. X 8 ft. wall sheathing or diagonal 2x bracing at corners.

\_\_\_ x \_\_\_ WALL GIRTS \_\_\_ O.C.

\_\_\_ POLE SPACING (Eave side)

SIDING (Steel / Vinyl)

\_\_\_ POLE SPACING (Gable side)

\_\_\_ X \_\_\_ WALL SHEATHING

\_\_\_ X \_\_\_ MIN. .60 TREATED WALL POLE

CONCRETE FLOOR \_\_\_" (Minimum 3 1/2")

SUBBASE \_\_\_" ( Sand / Peastone / Gravel)

\_\_\_ ROWE \_\_\_ X \_\_\_ .60TD SKIRT BOARD

FINISH GRADE TO FALL MIN. 6" IN FIRST 10 FT.

CONCRETE FOOTING \_\_\_" (Thickness)

Note: Minimum in-ground depth:  
Provide no less than 1/4 of total pole embedment  
In ground for wind load support. For buildings 12 ft. and  
over in height provide anchoring of poles from uplift.  
For alternative of this provide design from registered engineer.

CONCRETE FOOTING \_\_\_" (Diameter)

UNDISTRUBED SOIL

Note: Dry bag concrete shall be properly mixed with  
clean water per manufactures specks prior to  
placing in footing holes. (Do not put dry mix in footing holes.  
Do not mix concrete in footing holes.)

**POLE STRUCTURE WALL SECTION**