

APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION

NAPOLEON TOWNSHIP
 6755 Brooklyn Rd
 P.O. Box 385
 Napoleon, MI 49261
 PH: 517-536-8694
 Fax: 517-536-0112

Check for any deed restrictions applicable to this property and/or this construction

Authority: P.A. 230 of 1972, as amended
Completion: Mandatory to Obtain Permit
Penalty: Application must be completed, signed and proper fee enclosed

THE TOWNSHIP OF NAPOLEON WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP OR POLITICAL BELIEFS

APPLICANT TO COMPLETE ALL ITEMS IN SECTIONS I, II, III, IV, V and VI

Please Note: Separate applications must be made to the appropriate division for Plumbing, Mechanical and Electrical work

PROJECT INFORMATION

Project Owner's Name		Project Address		
City	Zip	Lot #	County of	State
Between		And		

II. IDENTIFICATION OR LESSEE

Owner or Lessee	Address
Contact Number	City / State / Zip
Fax Number	Email Address

ARCHITECT OR ENGINEER

Name	Address	
City	State	Zip
Contact Number	Fax	Email Address
License Number	Date Expires	

CONTRACTOR

Company Name	Applicant Name		
Address / City / State / Zip	Phone	Fax	
Builders License No. + exp date	Fed Employer ID	Workers Comp Ins	MESC Employer #

If changes are made to the existing grades of the property pertaining to this building permit that effect the flow or natural/historic drainage from an upper to lower property, any cost associated with the restoring of the natural/historic drainage will be the responsibility of the Permittee.
LEESEE MUST HAVE THE WRITTEN PERMISSION BY THE OWNER TO PULL PERMITS

III. Type of Improvement and Plan Review

Type of Improvement >> Residential Non-Residential
 Mark X where applies
 ___ New Building ___ Addition ___ Change in use or occupancy ___ Alteration
 ___ Relocation ___ Repair ___ Mobile Home Set up ___ Foundation Only
 ___ Demolition ___ Premanufactured Dimensions needed for project _____ X _____

Review(s) to be Performed (X) ___ Building ___ Mechanical ___ Foundation ___ Electrical ___ Plumbing

IV. Proposed Use of Building Residential—For “Wrecking, show most recent use

Mark X where applies
 ___ Single Family ___ Attached Garage ___ ft X ___ ft ___ Pool
 ___ Two or more Family ___ Detached Garage ___ ft X ___ ft ___ Deck
 # Of Units Building/Accessories Height ___ ___ Other
 ___ Hotel, Motel # of Units ___ Finished Basement

NON-Residential

Mark X where applies
 ___ Amusement ___ Service Station ___ School, Library, Educational ___ Night Club
 ___ Church, Religion ___ Hospital ___ Store, Mercantile ___ Hazardous
 ___ Industrial ___ Tank, Towers ___ Restaurant ___ Chemicals
 ___ Parking Garage ___ Public Utility ___ Other
 ___ Office, Bank, Professional Building

Non-Residential Describe in detail proposed use of building, E.G Food Processing Plant, Machine Shop, Laundry Building at Hospital, Elementary School, Secondary School, College, Parochial School, Parking Garage for Dept. Store, Rental Office Building, Office Building at Industrial Plant, if use of existing building is being changed, enter proposed use.

V. Selected Characteristics of Building (Principal Type of Frame) Mark X where applies

___ Masonry, Wall Bearing ___ Wood Frame ___ Structural Steel ___ Other ___ Reinforced Concrete

Principal Type of Heating Fuel (X) >> ___ Gas ___ Oil ___ Electricity ___ Coal ___ Other

Type of Sewage Disposal (X) >> ___ Public or Private Company ___ Septic System

Type Of Water Supply (X) >> ___ Public or Private Company ___ Private Well or Cistern

Type of Mechanical: Y/N Will there be ___ Air Conditioning ___ Fire Suppression ___ An Elevator

Dimension/Data No. of Stories ___ Use Group ___ Const. Type ___ Occupant Load ___ Separated or mixed ___

	Existing	Alterations	New
Floor Area	_____	_____	_____
Basement	_____	_____	_____
1 st & 2 nd Floor	_____	_____	_____
3 rd Floor	_____	_____	_____
Total Area	_____	_____	_____

Description of Construction : _____

Cost of Construction

\$ _____

No. of Off Street Parking Spaces

_____ Enclosed _____ Outdoors

VI. Applicant Information

WARNING NOTICE

NO OCCUPANCY PERMITS WILL BE ISSUED OR PERSONS ALLOWED TO MOVE ON THE PREMISES UNTIL FINAL APPROVAL HAS BEEN RECEIVED FOR ALL BUILDING, MECHANICAL, PLUMBING, AND/OR ELECTRICAL WORK PERFORMED ON THE PREMISES, IN ADDITION TO ZONING AND DEPT. OF PUBLIC WORK APPROVAL.

Applicant is responsible for the payment of all fees and charges applicable to this application and must provide the following information.

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.

Sec 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.

Signature of Applicant _____
Date

VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONROL				APPROVALS	
DEPARTMENT	REQUIRED	APPROVED	DATE	NUMBER	BY
Zoning	/ () Yes () No	/	/	/	/
1.Site Plan	/ () Yes () No	/	/	/	/
2.Variance Granted ZBA	/ () Yes () No	/	/	/	/
Fire	/ () Yes () No	/	/	/	/
Pollution Control	/ () Yes () No	/	/	/	/
Flood Zone	/ () Yes () No	/	/	/	/
Soil Erosion/County Drain	/ () Yes () No	/	/	/	/
Twp. Water/Sewer	/ () Yes () No	/	/	/	/
Water/County Health Dept	/ () Yes () No	/	/	/	/
Septic/County Health Dept	/ () Yes () No	/	/	/	/
County Road Comm	/ () Yes () No	/	/	/	/
Assessing Dept	/ () Yes () No	/	/	/	/

Computer Property Tax # _____ ALL Taxes paid up to date ___yes ___no

VII. Validation

The signature of the applicant on this application constitutes a certification by the applicant that the site plan, as submitted, is complete and accurate in all aspects. The township further shall have the right to rely on the accuracy of the same in connection with the issuance and the conducting of required inspections.

Approved by _____
 Footing _____ Rough _____ Insulation _____ Radon/
 Final _____ Backfill _____

Site Plan for New Construction



ROAD NAME

List property measurements, roads and curb lines and draw all building (s), existing fences & heights, add and note location of new buildings, sheds, decks, etc. and setbacks.



Jackson County Dept. of
Transportation
2400 N. Elm Road
Jackson, MI 49201
Phone: 517-788-4230
Fax: 517-788-4237

JCDOT USE ONLY

Date Received: _____
 Amt: _____ Received by: _____
 Cash Check # _____
 Permit Fee _____
 Culvert Fee _____
 Site Plan Fee _____
 Permit # _____

APPLICATION FOR

- () Residential Driveway Permit () Farm Driveway Permit
 () Other Service: _____ () Improve existing (Residential)

Explain

New Driveway / Property Location Information

Address: _____ Township: _____ Section #: _____

Side of Road: N S E W Subdivision: _____ Lot #: _____

Closest Address / nearest cross road: _____

Property Tax Identification #: _____
See lower left of your tax statement: (I.E.: 000-07-23-426-00100)

OWNER / APPLICANT INFORMATION

Name of Applicant: _____ Daytime Phone: _____

Mailing Address: _____
Address City State Zip code

Email Address: _____ Fax Number: _____

SIGNATURE

I hereby make application in good faith and give or have secured permission for the Jackson County Department of Transportation to enter the property referenced in this application for the purpose of making an onsite evaluation to determine the suitability of said parcel for construction of an onsite driveway access.

The applicant is responsible for obtaining all other permits required to construct a driveway. These may include but not limited to any permit required by the DEQ. It is the applicant's responsibility to insure that the property is not in a designated wetland. Information is available at: <http://www.mogi.state.mi.us/wetlands/>

Signature: _____ Date: ___/___/___ () Owner () Applicant/Agent

ADDITIONAL INFORMATION

*Applicant will place two stakes that are available for pick up in the JCDOT headquarters and place them 24' apart to designate the exact desired location of drive and to assist JCDOT personnel in determination of drive requirements.

*Sight Distance from desired drive shall be a minimum of 100 feet for each 10 miles of legal speed limit (Unless determined by JCDOT)

*Applicant is responsible for culvert if damaged during property development.

DRIVEWAY GUIDELINES:
 Driveway Width: 10'-20'
 Driveway Radil: 10'-15'
 Driveway Grade: Slope driveway approach away from road at 1/2" per foot to ditch line.

DRIVEWAY SURFACE:
 If the driveway requires drainage improvement, you will be contacted by the Inspector and a culvert and gravel will be installed by JCDOT Personnel.

Jackson County Department of Transportation Site Evaluation

ADDITIONAL INFORMATION (to be filled out by JCDOT)

Drive Culvert Size: _____ Drive Culvert Length: _____

Grading, tree removal and ditching required: _____

Site Distance: _____ Speed Limit: _____

Superintendent's Comments: _____

Recommended for Issuance: _____

Approved by: _____ Date: _____

Temporary Drive: Approved Date: ___/___/___ Bond Paid: ___/___/___ Removed: ___/___/___

Bond Release: Amount: _____ Date: ___/___/___

Bond Retained: Amount: _____ Comments: _____

Culvert Installation: Work Order Sent: ___/___/___ Install Date: ___/___/___

Napoleon Township Building Department
 6755 Brooklyn Rd
 P.O. Box 188
 Napoleon, MI 49261-0385
 517-536-8694 ext 203

2015 Michigan Residential Code


Energy Worksheet for New Single Family Residential Building

To facilitate permit issuance and enable the plan reviewer to verify compliance with the applicable energy efficiency provisions of the 2015 Michigan Residential Code, please **complete this form (Parts I, II and III) and submit it along with your application for a new single-family residential building**

Project	
Address:	

Part I - Mandatory Provisions

The following requirements (see code for full text) apply to all new single-family residential buildings. Indicate that you understand and will comply with the following provisions by checking each box.

MRC Sec. #	Description	
N1101.12.1 and 1.1	<p>For insulation products that do not have an identification mark from the manufacturer, the insulation installer shall provide a certification listing the type, manufacturer and R - value of insulation in each element of the building thermal envelope. For blown or sprayed insulation, the initial thickness, settled thickness, settled R - value, installed density, coverage area and number of bags shall be listed on the certification. In addition, markers shall be installed throughout attic spaces in accordance with N1101.12.1.1.</p> <p>For sprayed polyurethane foam insulation, the installed thickness of the areas covered and the R - value of the installed thickness shall be listed on the certification.</p> <p>Insulation certificates shall be submitted and approved by the Building Department prior to issuance of a Certificate of Occupancy.</p>	<input type="checkbox"/>
N1101.16	<p>Prior to final inspection, a permanent energy code certificate shall be posted on or in the electrical distribution panel. Such certificate shall be on a label approved by the Building Department and include all information required by Section N1101.16.</p>	<input type="checkbox"/>
N1102.4.1.2, N1105, or N1106	<p>Air Leakage Testing - The building or dwelling unit shall be tested and verified as having an air leakage rate not exceeding the limits of the compliance path chosen.</p> <p>Testing shall be conducted by a certified independent third party. Testing shall be performed at any time after creation of all penetrations of the building thermal envelope and such testing shall be conducted in the manner outlined in Section N1102.4.1.2.</p> <p>A written report of the results of the test shall be signed by the party conducting the test and provided to the code official.</p>	<input type="checkbox"/>

Air Leakage - The components of the building thermal envelope as listed in Table N1102.4.1.1 shall be installed in accordance with manufacturer's installation instructions and the following criteria: **TABLE N1102.4.1.1 (R402.4.1.1) AIR BARRIER AND INSULATION INSTALLATION**

COMPONENT	CRITERIA
Air barrier and thermal barrier	A continuous air barrier shall be installed in the building envelope. The exterior thermal envelope shall contain a continuous air barrier. Breaks or joints in the air barrier shall be sealed. Air-permeable insulation shall not be used as a sealing material
Ceiling/attic	The air barrier in any dropped ceiling/soffit shall be aligned with the insulation and any gaps in the air barrier sealed. Access openings, drop down stair, or knee wall doors to unconditioned attic spaces shall be sealed.
Walls	Corners and headers shall be insulated and the junction of the foundation and sill plate shall be sealed. The junction of the top plate and top of exterior walls shall be sealed. Exterior thermal envelope insulation for framed walls shall be installed in substantial contact and continuous alignment with the air barrier. Knee walls shall be sealed.
Windows, skylights and doors	The space between window/door jambs and framing, and skylights and Framing shall be sealed.
Rim joists	Rim joists shall be insulated and include the air barrier.
Floors (Including Above-garage and cantilevered floors)	Insulation shall be installed to maintain permanent contact with underside of subfloor decking. The air barrier shall be installed at any exposed edge of insulation
Crawl space walls	Where provided in lieu of floor insulation, insulation shall be permanently attached to the crawlspace walls. Exposed earth in unvented crawl spaces shall be covered with a Class I vapor retarder with overlapping joints taped.
Shafts, penetrations	Duct shafts, utility penetrations, and flue shafts opening to exterior or unconditioned space shall be sealed.
Narrow cavities	Batts in narrow cavities shall be cut to fit, or narrow cavities shall be filled by insulation that readily conforms to the available cavity space.
Garage separation	Air sealing shall be provided between the garage and conditioned spaces.
Recessed lighting	Recessed light fixtures installed in the building thermal envelope shall be air tight, IC rated, and sealed to the drywall.
Plumbing and	Batt insulation shall be cut neatly to fit around wiring and plumbing in exterior walls, or insulation that readily conforms to available space shall extend behind piping and wiring.
Shower/tub on exterior wall	Exterior walls adjacent to showers and tubs shall be insulated and the air barrier installed separating them from the showers and tubs.
Electrical/phone box on ext. walls	The air barrier shall be installed behind electrical or communication boxes or air-sealed boxes shall be installed.
HVAC register boots	HVAC register boots that penetrate building thermal envelope shall be
Fireplace	An air barrier shall be installed on fireplace walls.



N1102.4.1.1

N1102.4.2	Fireplaces – New wood-burning masonry fireplaces shall have tight—fitting flue dampers and outdoor combustion air.	<input type="checkbox"/>	<input type="checkbox"/>
N1102.4.3	Fenestration Air Leakage – Windows, skylights and sliding glass doors shall have an air infiltration rate of no more than 0.3 cfm per square foot, and swinging doors on more than 0.5 cfm per square foot, when tested according to NFRC 400 or AAMA/WDMA/CSA 101/I.S.2/A440 by an accredited, independent laboratory and listed and labeled by the manufacturer. Exceptions: Site built windows, skylights and doors. Labels shall remain on windows until after insulation inspection.	<input type="checkbox"/>	N/a
N1102.4.4	Recessed Lighting – Recessed luminaires installed in the building thermal envelope shall be sealed to limit air leakage between conditioned and unconditioned spaces. All recessed luminaires shall be IC-rated and labeled as having an air leakage rate not more than 2.0 cfm when tested in accordance with ASTM E283 at a 1.57 psf pressure differential. All recessed luminaires shall be sealed with a gasket or caulk between the housing and the interior wall or ceiling covering.	<input type="checkbox"/>	
N1103.1	Controls - At least one thermostat shall be provided for each separate heating and cooling system	<input type="checkbox"/>	
N1103.1.1	Programmable thermostat. Where the primary heating system is a forced-air furnace, at least one thermostat per dwelling unit shall be capable of controlling the heating and cooling system on a daily schedule to maintain different temperature set points at different times of the day. This thermostat shall include the capability to set back or temporarily operate the system to maintain zone temperatures down to 55°F or up to 85°F. The thermostat shall initially be programmed with a heating temperature set point no higher than 70°F and a cooling temperature set point no lower than 78°F.	<input type="checkbox"/>	
N1103.1.2	Heat pump supplementary heat - Heat pumps having supplementary electric resistance heat shall have controls that, except during defrost, prevent supplemental heat operation when the heat pump compressor can meet the heating load.	<input type="checkbox"/>	
N1103.2.2	Sealing - Ducts, air handlers, and filter boxes shall be sealed with approved sealants, including joints and seams. Exceptions: 1. Air-impermeable spray foam products may be applied without additional joint seals. 2. Where a duct connection is made that is partially inaccessible, 3 screws or rivets shall be equally spaced on the exposed portion of the joint so as to prevent a hinge effect. 3. Continuously welded and locking-type longitudinal joints and seams, of other than snap-lock and button-type per Section M1601.4.1, in ducts operating at static pressures less than 2 inches of water column pressure classification shall not require additional closure systems.	<input type="checkbox"/>	

ADDRESS APPLICATION

JACKSON COUNTY, MICHIGAN

1. Submit **COPIES** of the four items listed below and fee of \$35.00 to the **NAPOLEON TWP ASSESSOR**
 - a) Proof of Ownership (*copy of deed or current tax bill – must have complete legal description*)
 - b) Tax Identification Number
 - c) Site Plan showing location of the principal building and driveway
 - d) Closest existing addresses to both sides and across the street from property
(Indicate approximate distance each address is from your drive)

Please note: assigned addresses are considered final, addresses changes will be subject to additional fees.

Date: _____	Tax Identification Number: _____
Owner Information:	Applicant Information: (<i>If different than owner</i>)
Name _____	Name _____
Current Address _____	Current Address _____
City, State, Zip _____	City, State, Zip _____
Phone _____	Phone _____
Email _____	

JACKSON COUNTY USE ONLY	
Address # Assigned _____	
Date Assigned _____	
Assigned By _____	

Addressing Questions?

Jackson County Street Naming/Address Ordinance Administrator:
120 W Michigan Ave
Jackson MI 49201

Phone (517) 768-6691 Fax (517) 768-6693

addressingadministrator@co.jackson.mi.us

Jackson County Health Department Requirements prior to Building Permit issuance.
When required-Health Dept. Permits must be approved and submitted with building permit Applications. JCHD — 517-788-4220

Well and/or Septic Permit

- *The JCHD is responsible for the oversight of onsite wastewater and onsite water wells.
- *This pertains to new construction, replacement septic systems, replacement water wells, connection of existing well and septic system to new or replaced structures.
- *Permits are issued once site evaluations are conducted by a representative of the Jackson County Health Department.

When are well and/or septic permits needed?

- *All Demolitions currently serviced by Well and/or Septic systems in place that may or may not be replaced.
- *For any parcel of land that will be serviced by either an onsite sewage disposal system and/or an onsite water well.
- *When existing structures that are over 50% voluntarily demolished or removed. This would include structures that were destroyed by fire or casualty.
- *Change of use of the property. For example: a residential home to a commercial building. This could include going from a small business to a larger business with many more uses of the water supply and/or sewage disposal system. It could include an addition to the existing home or replacing a home with a new or different home.

Please Check N/a _____ Permit Attached _____

*A copy of the actual permit will have the permit number at the top and will show what type of permit was issued for that parcel. It will have "WELL" or "SEPTIC" located at the top of the page under the permit number.

Soil Erosion and Sediment Control (SESC) Permits

When is a Soil Erosion and Sediment Control Permit Needed?

- *Any soil excavation or exposure of soil within 500 feet of a body of water, stream, wetland (greater than 5 acres or contiguous), or designated county drain connected to surface water.
- *If more than 1 acre of land is disturbed

Examples when a SESC Permit is needed:

- *Construction of a new home, garage, barn or other structure disturbing soil greater than 225 square feet.
- *Removing or demolishing a home on a parcel and may or may not be replaced with another structure.
- *An addition to existing home that will require more than 225 square feet of soil disturbance.
- *Any Land balancing that may include filling or cutting of grade.
- *Some utility extensions that have open cut trenching greater than 225 square feet.
- *Fill behind seawall or placement of dredging material on up-lands near surface water.

Waivers

*Waivers are available for some projects, however any request for waivers are to be completed using a Jackson County Health Department Form.