



CITY of COLDWATER

Neighborhood Services Department
Henry L. Brown Municipal Building
One Grand Street, Coldwater, Michigan 49036
(517) 279-9501
www.coldwater.org

Requirements for Obtaining Building Permits **City of Coldwater, Michigan**

Any owner, owner's builder, architect or agent who intends to construct, enlarge, alter, repair, move, demolish, or change the occupancy of a building or structure, or to cause such work to be done, must submit an application to the building official and obtain the required permit(s).

Application

To obtain a permit, complete an application and return to the building department for review along with the following:

Residential Structures

(One and Two-family Residential with less than 3,500 square feet of calculated floor area)

*Minimum of two (2) sets of plans that include the following:

- Foundation and Floor Plans
- Roof and wall section
- Heating Energy Analysis Comparison Report
- Building elevation
- Site Plan

*Permit Fees

Commercial Structures

(Including One and Two-family Residential with more than 3,500 sq ft of calculated floor area)

*Minimum of two (2) sets of sealed architect plans

*Permit fees

Mobile and Pre-manufactured Homes

*Minimum of two (2) sets of [plans](#) for the foundation and the method or anchoring the unit to the foundation

*Site plan

*For Michigan approved pre-manufactured units; one (1) copy of the Building System approval and the approved plans

*Permit fees

Building Permit Fees

Permit fees may be obtained from Neighborhood Services by calling 517-279-9501.

Contractor Requirements

Homeowners

The Michigan Licensing Law gives homeowners an exemption to act as their own general contractor provided all contractors for all trades hold a valid Michigan Builders License

Homeowner must be on site for all inspections, is responsible for all building code violations and will incur all of the responsibility that a licensed contractor would assume

Contractors

*Current Contractors License (applicant license number & expiration date)

*Drivers License

*Copy of Worker's Comp Insurance

When to Call for Inspection

It is the permit-holder's responsibility to call for all required inspections at least 24 hours in advance and to provide access and means for inspection. Inspections can be scheduled in person at Neighborhood Services or by calling 517-279-9501.

Work shall not be done beyond each successive inspection without first obtaining approval of the building official. No portion of work shall be covered or concealed without authorization from the building official.

Foundation Inspections

Footing – call for inspection prior to placing concrete in piers, trenches and formwork

Backfill – call for inspection prior to backfilling and after footings, walls, waterproofing and drain tile are installed.

Rough Inspection

A rough inspection is to be made *after* the roof deck, all framing, fireblocking and bracing are in place and the rough electrical, mechanical and plumbing are approved and *before* insulation is installed.

Insulation Inspection

An insulation inspection is required after rough-in for building, mechanical, electrical and plumbing has been approved. A separate insulation inspection shall be scheduled.

Final Inspection

A final inspection is to be completed *prior* to occupancy of structure. All open permits (electrical, mechanical and plumbing) must be approved prior to scheduling a final inspection.

Certificate of Occupancy

A new building or a building that is altered shall not be used or occupied until a Certificate of Occupancy has been issued. After the Building Official inspects the building or structure and finds no violations a Certificate of Occupancy may be issued.



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Authority:	1972 PA 230
Completion:	Mandatory to obtain permit
Penalty:	Permit will not be issued

NOTE: Obtain Plumbing, Mechanical and Electrical Permits from Branch County Building Department 517-279-4303

I. Project Information					
PROJECT NAME		DATE		ADDRESS	
CITY OF: Coldwater			COUNTY Branch	ZIP CODE 49036	
II. Identification					
A. Owner or Lessee					
NAME			ADDRESS		
CITY	STATE		ZIP CODE	PHONE NUMBER (Include Area Code)	
EMAIL				OTHER PHONE	
B. Architect or Engineer					
NAME			ADDRESS		
CITY	STATE		ZIP CODE	PHONE NUMBER (Include Area Code)	
LICENSE NUMBER	EMAIL		EXPIRATION DATE	FAX NUMBER (Include Area Code)	
C. Contractor					
NAME			ADDRESS		
CITY	STATE		ZIP CODE	PHONE NUMBER (Include Area Code)	
BUILDERS LICENSE NUMBER			EXPIRATION DATE	FAX NUMBER (Include Area Code)	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION			EMAIL		
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION					
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION					
III. Type of Improvement and Plan Review					
A. Type of Improvement					
1. NEW BUILDING	3. ALTERATION	5. DEMOLITION	7. ROOFING	9. FENCE	11. GARAGE
2. ADDITION	4. REPAIR	6. MOBILE HOME SET-UP	8. SIDING	10. GARAGE	12.
B. Plan Review Required					
Plans must be submitted with the appropriate fee before a permit can be issued, except as listed below.					
Plans are not required for alterations and repair work determined by the building official to be of a minor nature.					
Plans and specifications are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.					
Plan Review Submission No. _____					

IV. Proposed Use of Building

A. Residential

- | | | |
|-----------------------|--|--------------------|
| 1. ONE FAMILY | 3. HOTEL, MOTEL,
NO. OF UNITS _____ | 5. DETACHED GARAGE |
| 2. TWO OR MORE FAMILY | 4. ATTACHED GARAGE | 6. OTHER |

RESIDENTIAL – Describe in detail proposed project.

B. Non-Residential

- | | | |
|---------------------|--------------------------------|----------------------------------|
| 7. AMUSEMENT | 11. SERVICE STATION | 15. SCHOOL, LIBRARY, EDUCATIONAL |
| 8. CHURCH, RELIGION | 12. HOSPITAL, INSTITUTIONAL | 16. STORE, MERCANTILE |
| 9. INDUSTRIAL | 13. OFFICE, BANK, PROFESSIONAL | 17. TANKS, TOWERS |
| 10. PARKING GARAGE | 14. PUBLIC UTILITY | 18. OTHER _____ |

NON-RESIDENTIAL – Describe in detail proposed use of building (ie: food processing plant, machine shop, laundry building, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being change, enter proposed use.

V. Selected Characteristics of Building

A. Principal Type of Frame

- | | | | | |
|--------------------------|---------------|---------------------|------------------------|----------------|
| 1. MASONRY, WALL BEARING | 2. WOOD FRAME | 3. STRUCTURAL STEEL | 4. REINFORCED CONCRETE | 5. OTHER _____ |
|--------------------------|---------------|---------------------|------------------------|----------------|

B. Principal Type of Heating Fuel

- | | | | | |
|--------|--------|----------------|---------|-----------|
| 6. GAS | 7. OIL | 8. ELECTRICITY | 9. COAL | 10. OTHER |
|--------|--------|----------------|---------|-----------|

C. Type of Sewage Disposal

- | | |
|-------------------------------|-------------------|
| 11. PUBLIC OR PRIVATE COMPANY | 12. SEPTIC SYSTEM |
|-------------------------------|-------------------|

D. Type of Water Supply

- | | |
|-------------------------------|-----------------------------|
| 13. PUBLIC OR PRIVATE COMPANY | 14. PRIVATE WELL OR CISTERN |
|-------------------------------|-----------------------------|

E. Type of Mechanical

- | | | | | | |
|-------------------------------------|-----|----|-------------------------------------|-----|----|
| 15. WILL THERE BE AIR CONDITIONING? | YES | NO | 16. WILL THERE BE FIRE SUPPRESSION? | YES | NO |
|-------------------------------------|-----|----|-------------------------------------|-----|----|

F. Dimensions / Data

17. NUMBER OF STORIES _____	21. FLOOR AREA:	EXISTING	ALTERATIONS	NEW
18. USE GROUP _____	BASEMENT	_____	_____	_____
19. CONSTRUCTION TYPE _____	1 ST & 2 ND FLOOR	_____	_____	_____
20. NO. OF OCCUPANTS _____	3 RD – 10 TH FLOOR	_____	_____	_____
	11 TH – ABOVE	_____	_____	_____
	TOTAL AREA	_____	_____	_____

G. Number of Off Street Parking Spaces

- | | |
|--------------------|--------------------|
| 22. ENCLOSED _____ | 22. OUTDOORS _____ |
|--------------------|--------------------|

VI. Applicant Information

APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.

NAME		ADDRESS	
CITY	STATE	ZIP CODE	PHONE NUMBER (Include Area Code)

FEDERAL EMPLOYER ID NUMBER (or reason for exemption)

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/HER 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 125.1523A, 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.

Signature of Applicant

COST OF PROJECT:	BUILDING PERMIT FEE	\$
	PLAN REVIEW FEE	\$
	TOTAL	\$
METHOD OF PAYMENT:		

VII. Local Governmental Agency to Complete this Section

ENVIRONMENTAL CONTROL APPROVALS						
	REQUIRED?		APPROVED	DATE	NUMBER	BY
A - Zoning	YES	NO				
B - Fire District	YES	NO				
C - Pollution Control	YES	NO				
D - Noise Control	YES	NO				
E - Soil Erosion	YES	NO				
F - Flood Zone	YES	NO				
G - Water Supply	YES	NO				
H - Septic System	YES	NO				
I - Variance Granted	YES	NO				
J - Other	YES	NO				

VIII. Validation - For Department Use Only

USE GROUP _____ SQUARE FEET _____

TYPE OF CONSTRUCTION _____

APPROVAL SIGNATURE

TITLE	DATE
YES NO	

IX. Site or Plot Plan - For Applicant Use

The Department of Neighborhood Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.