

**BEAR CREEK TOWNSHIP
BUILDING INSPECTION DEPARTMENT**

373 N. DIVISION RD. PETOSKEY, MI 49770
231-347-3204 Fax 231-347-0736
e-mail building@bearcreektownship.com

**ROOFING & SIDING
BUILDING PERMIT APPLICATION**

Permits not fully completed will be returned to sender

APPLICATION FEE: \$45.00 non-refundable

PERMIT NO. PB _____
Ck#/cash _____ \$ _____ DATE _____

JOB SITE LOCATION _____ NUMBER & STREET 24 - 01 - _____ - _____ - _____ - _____	DESCRIBE PROJECT: Nature of project: (garage, residence, pole bldg) ATTN: PROJECTS STARTED PRIOR TO OBTAINING A PERMIT WILL BE CHARGED AN ADDITIONAL \$50.00 FEE.
OWNER INFORMATION	
NAME _____ MAILING ADDRESS _____ CITY, STATE, ZIP CODE _____ PHONE NUMBER E-MAIL ADDRESS _____	Siding <input type="checkbox"/> Roofing <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> PROJECTED COST: \$ _____ HOW MANY SQ _____ MATERIAL USED _____ _____

****PERMIT PRICING: RESIDENTIAL: \$4.00 PER SQUARE WITH MINIMUM FEE OF \$90.00 along with \$45.00 Application fee
COMMERCIAL: WILL NEED TO COME INTO OFFICE TO GET FEES.**

CONTRACTOR IDENTIFICATION (LICENSED CONTRACTOR ONLY)

NAME	LICENSE NUMBER	EXPIRATION DATE
MAILING ADDRESS	TAX I.D. NUMBER	MESC NUMBER
CITY, STATE, ZIP CODE	WORKERS COMP CARRIER	
PHONE NUMBER	E-MAIL	FAX
CONTRACTOR SIGNATURE	DATE	

PLEASE READ BEFORE SIGNING:
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 the 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.

ALSO READ: 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. Violations of section 23a are subject to civil fines.

PERSON RESPONSIBLE: NAME: _____			
Please Print			
MAILING ADDRESS: _____			
Street Address	City	State	Zip
SIGNATURE OF APPLICANT/CONTRACTOR/AGENT-RESPONSIBLE PARTY			
SIGN HERE _____			DATE _____

CALL IN YOUR INSPECTIONS AT 231-347-3204 M-THURS 8-NOON.