

Date ____ / ____ / ____
VILLAGE OF STOCKBRIDGE

COMMERCIAL SIGN BUILDING PERMIT

VILLAGE OF STOCKBRIDGE
 PO BOX 155 / 305 W ELIZABETH ST
 STOCKBRIDGE MI 49285
 PH. 517-851-7435 FAX.517-772-6222
 BLDG DEPT. 800-627-2801 EXT. 0

Permit # _____

Job Location: _____ Property tax: _____

Owner: _____ Phone: _____

Address: _____

No. of Floors: _____ Bldg. Height: _____

For Office Use Only
 Zoning District _____
 Use Group _____
 Type of Construction _____
 Permit Determinate _____

NONRESIDENTIAL – Describe in detail proposed use of building, e.g., food processing plant, machine shop, laundry building at hospital, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use. **Type of Improvement:** _____

REQUIRED DOCUMENTS

- ____ Site Plan Approval
- ____ Site Plan
- ____ Variance Approval (if applicable)
- ____ **3 Sets of Sealed Drawings & Specs**
- ____ P.A. 135 Disclosure

ADDITIONAL PERMITS REQUIRED

- ____ Curb or Sidewalk Cut
- ____ Electrical
- ____ Mechanical
- ____ Plumbing
- ____ Sign or Billboard
- ____ Demolition
- ____ Erosion Control
- ____ Sanitary Sewer Tap
- ____ Storm Sewer Connection

PLAN REVIEW \$ _____
 COST OF PERMIT \$ _____
 TOTAL COST \$ _____

 Building Official
 Make Checks Payable to **VILLAGE OF STOCKBRIDGE**

Engineer/Architect: _____ Phone: _____

Address: _____

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

Name		Phone	Fax
Address		City	State/Zip Code
Fed ID# or SS#	MESC Emp. #	Worker's Disability Comp Carrier	
License #	Exp Date	Exempt Reason:	

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 the state relating to the persons who are to perform work on a residential building or residential structure. Violators of Section 23a are subject to civil fines.

AGENT'S AFFIDAVIT

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.

Signed: _____ Date: _____

SIGN INSTALLATION

PERMIT APPLICATION CHECKLIST (Return with Application)

Permit application for: (job address): _____

Owner's Name: _____

Contractor's Name: _____

Before a zoning approval may be granted, all of the following documentation must be submitted with an application to place the sign. By providing all information, you can assure that the application can be reviewed as efficiently as possible.

- _____ 1. **COMMERCIAL PERMIT APPLICATION.**
- _____ 2. **LOT DIAGRAM or PLOT PLAN** on page two of the application form. The drawing must include all items listed on the form, and must show where the sign is to be placed on the owners property, and its relationship to buildings and lot lines.
- _____ 3. **THREE (3) SETS OF SEALED DRAWING & SPECIFICATIONS.** Drawings must include height of the sign and foundation plans. For exterior wall signs, include a drawing that dimensions the entire face of the wall. If there will be multiple signs, and or existing signs, please indicate complete information for all signs that will be located on the property.
- _____ 4. **TYPE:** Indicate type of sign to be placed (i.e. free standing pylon, monument, wall, temporary, etc.)
- _____ 5. **PROOF OF OWNERSHIP** (deed, land contract, tax statement, etc.)
- _____ 6. **PROPERTY TAX ID NUMBER FOR PROPERTY INVOLVED.**
- _____ 7. **ELECTRICAL PERMIT:** A separate electrical permit is required for illuminated signs.

Your application will be reviewed when all information has been received, and a permit issued when compliance with applicable ordinance requirements has been verified. Placement of the signage should not proceed until you have first received the zoning approval permit. Approval is required prior to placement of any sign or sign component.

VILLAGE OFFICE HOURS are Monday – Friday, 9am- 3:00pm, 305 W Elizabeth St. Rm. 107 Stockbridge, MI 49285; PHONE is (517) 851-7435; by MAIL PO Box 155, Stockbridge, MI 49285; Email clerk@vosmi.org ; or by FAX at (517) 772-6222.

BUILDING DEPARTMENT: Ph. (800)627-2801 Monday through Friday 8-12 and 1:30-4:30

Signed: _____

Date: _____

**PLEASE CALL SHOULD YOU REQUIRE FURTHER
ASSISTANCE IN COMPLETING APPLICATIONS.**

Blue prints and drawings must contain sufficient detail to perform a plan review for conformance with the State Building Code. Include wall section/cross-section drawing showing material dimensions and specification from footing to rafters, as well as floor plan indicating all room dimensions, window, door, and stair openings. All structures containing pre-manufactured members (roof trusses, floor trusses, laminated beams, etc.) require sealed diagram from the manufacturer; forward to our office at time of delivery.

SANITATION

Village of Stockbridge
PO Box 155
305 W Elizabeth St Rm 107
Stockbridge MI 49285
Phone:(517) 851-7425

ADDRESS

Village of Stockbridge
PO Box 155
305 W Elizabeth St Rm 107
Stockbridge MI 49285
Phone:(517) 851-7425

DRIVEWAY

M-52 or M-106
MDOT
Phone:(517) 335-3754

DRIVEWAY

Village of Stockbridge
PO Box 155
305 W Elizabeth St Rm 107
Stockbridge MI 49285
Phone:(517) 851-7425

ZONING

Associated Gov't Svc.
Phone:(800) 627-2801
M-F 8:00-12:00, 1:30-4:30

BUILDING CODE

Associated Gov't Svc.
Phone:(800) 627-2801
M-F 8:00-12:00, 1:30-4:30

SESC PERMITS

Ingham County Drain Commission
Phone: (517) 676-8395

DEQ PERMITS

Lansing District Office
PO Box 30242 Lansing MI 48909-7742
525 W Allegan (Constitution Hall)
Phone: (517) 284-6651

DNR PERMITS

Chuck Dennison
Phone: (734) 426-4913
dennisonc@mi.gov

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