

Commercial Building Permit Application

Date: _____

Job location: _____

Property Tax ID# _____

Property Owner _____

Owner Address _____

Phone _____ Email _____

Design Professional

Name of Design Firm _____

Address of Design Firm _____

Name of Architect or Engineer _____

Phone _____ email _____

General Contractor

Name of General Contractor _____

Contractor Address _____

Contact Person _____

Phone _____ email _____

Michigan Builder's License # (optional) _____ Expires _____

Federal Employer # or reason for exemption _____

Worker's Compensation # or reason for exemption _____

MESC # or reason for exemption _____

CONTRACTOR 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/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION ON THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE.

Contractor's Signature _____ **Date** _____