



15185 Algoma Ave., NE
Cedar Springs, MI 49319
PH: 616-696-1718 FAX: 616-696-3970

TEMPORARY BUILDING PERMIT APPLICATION

1. Description of Temporary residential building project:

2. Permanent Parcel Number: 41-02- _____ - _____ - _____

Owner of Property: _____

3. Confirmed Street Address (from tax roll or driveway permit): _____

Estimated time of use of For Temporary Residential Building (*may not exceed 6 months*) _____

5. Owner's Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Your application must be accompanied by:

- A copy of builder's contractor's license
- A completed Solon Township Contractor's Registration form.

6. Will you be performing the building of the structure yourself? (Please circle one.) Yes No

7. Will you be performing the electrical work yourself? (Please circle one.) Yes No

8. Will you be performing the plumbing work yourself? (Please circle one.) Yes No

9. Will you be performing the mechanical work yourself? (Please circle one.) Yes No

*** If you are hiring individuals for the above work, they must be licensed contractors who are registered with the township.**

10. During the process of building, you will have to call for inspections. The following inspections are necessary:

- Initial
- Rough-in
- Final
- Violation Compliance (if necessary)

A. **Building Inspections:** Call Robert Ellick at 616-696-1718.

B. **Electrical Inspections:** The first inspection is made upon completion of the rough-in. Power will not be hooked up by the utility company until payment of permit fees and inspection by the electrical inspector have been made. The inspector will call the utility company for hook-up. Call Colt Jacobs at 616-318-2964.

C. **Plumbing Inspections:** The first inspection is made upon completion of the rough-in. (Underground and/or structural). Call Jeff Biegalle at 616-438-5957.

D. **Mechanical Inspections:** The first inspection is made upon completion of the rough-in. (Underground and/or structural). Call Jeff Biegalle at 616-438-5957.

FEE SCHEDULE/ESCROW AGREEMENT

Payment must be made on separate checks

Please include a check for \$100.00 made out to Solon Township. CHECK # _____ CASH _____

Date Received: _____ Township Representative: _____

Please include a check for \$2,000.00 made out to Solon Township. CHECK # _____ CASH _____

Date Received: _____ Township Representative: _____

The home-owner and/or builder is/are responsible to meet and uphold all ordinances of Solon Township. (Zoning Ordinance Books are available at the township offices for \$25.00)

Return all pages of this signed, completed form to the township office.

Owner's Signature _____

Date

TOWNSHIP OFFICIAL *DATE RECEIVED*