## APPLICATION FOR SPARTA TOWNSHIP DEMOLITION PERMIT

160 E. Division St., Sparta MI 49345 Phone: (616)887-8863 Fax: (616)887-3823 www.spartatownship.org

BUILDING INSPECTOR Steve Boluyt 616-437-7201	ELECTRICAL INSP Jim Thorington 616-255-6502	PLUMBING INSP Vince Milito 616-340-1058	MECHANICAL INSP Vince Milito 616-340-1058
DATE:		PP # 4	1-05
BUILDING SITE ADDRESS:			
BETWEEN WHAT CROSS S	STREETS:	AND	
APPLICANT/CONTRACTO	R:		
ADDRESS:		PH0	ONE:
		LICENS	EE #:
E-MAIL ADDRESS:			
OWNER'S NAME IF DIFFEI	RENT THAN ABOVE:		
ADDRESS:			
OWNER SIGNATURE:		DATE:	
	BUILDING INF	FORMATION .	
LOT SIZE:	SIZE: SQUARE FOOT OF BUILDING:		
BUILDING DIMENSIONS: _	FT WIDE BY	YFT LONG	S FT HIGH
PROJECT DESCRIPTION: (	house, garage, pole bldg.	, etc.)	
TYPE OF FOUNDATION: _			
Fees are determined as	s follows:		
Base fee -			\$100
Escrow fe	\$2,000		
>	- over 10,000 sq.	ft.	\$4,000

(Revised 4/2024)

	onsible for the pay wing information:	ment of all fees and o	charges applicabl	e to this application and must
			Phone #	
Name				
			Fax #	
Address				
			Cell #	
authorized by the	e owner to make the of the State of Mich	nis application as his	authorized agent,	rd and that I have been and we agree to conform to all application is accurate to the
being Se circumve	ection 125.1523a cent the licensing re	of the Michigan Comp equirements of this sta	iled Laws, prohibi Ite relating to pers	230 of the Public Acts of 1972, its a person from conspiring to sons who are to perform work on on 23a are subject to civil fines.
Signature of Applicant			_	Application Date
	_	ntal agency to compl	ete this section	below
Environmental	control approvals	5	Approved	
Septic System	ed			
Building Permit	t #		Approved by:	
Issue Date				
Permit Fee			Signature	

Title

## SPARTA TOWNSHIP BUILDING DEPARTMENT

## **AFFIDAVIT**

In compliance with P.A. 383 of 1965 (Residential Builders, Maintenance and Alteration Contractors Law), and amendment of Section 16A, By P.A. 153 of 1967.

STATE OF MICHIGAN			
COUNTY OF KENT			
I, (Name)	_1		
(Name)	(Address)		
(City, State, Zip)	(Phone#)		
Hereby execute this affidavit for the attaclicense number as prescribed in the abo	ched permit testifying to a legal exemption for a ve Public Act and Amendment.		
By signing this statement, I assume the	following responsibilities:		
	rmit must meet zoning and building code ts, the <b>Holder of the Permit</b> must improve it to		
<ol> <li>All insurance liability is assum</li> </ol>			
<ol> <li>The responsibility for injury to workers also falls on the Permit Holder as homeowner's policies <u>Do Not</u> normally cover worker's compensation claims.</li> </ol>			
	All electrical, mechanical and plumbing work done under the attached permit		
<ol><li>The construction work covered</li></ol>	The construction work covered by this permit will be for my own use or occupancy and will be located on property owned by me.		
	Signed		
	Date		