

SUMMIT TOWNSHIP
 2121 Ferguson Road
 Jackson, MI 49203
 517-788-4113 FAX 517-783-2552

BUILDING PERMIT APPLICATION – ROOFING

I. PROJECT INFORMATION

Job Location	
Name of City and County in which job is located	Cross Streets

II. IDENTIFICATION

A. Owner or Lessee

Name		Address	
City	State	Zip Code	Telephone Number

B. Contractor

Name		Address	
City	State	Zip Code	Telephone Number
Builders License Number	Expiration Date	Cell/Mobile Phone Number	
Federal Employer ID Number (or reason for exemption)		E-mail address	
Workers Compensation Insurance Carrier (or reason for exemption)		MESC Employer Number (or reason for exemption)	

III. TYPE OF IMPROVEMENT, DESCRIPTION AND FEE

- COMMERCIAL
 RESIDENTIAL

A. Type of Improvement

Roof: \$120.00	Estimated Construction Value: _____
Administration Fee: \$25.00	Estimated Square Footage: _____
Total Permit Fee: \$145.00	

B. Description of Roof Installation Location

IV. Applicant Signature

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 submitted on this application is accurate to the best of my knowledge.

Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, 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 residential structure. Violators of Section 23a are subjected to civil fines.

Signature of Applicant _____ Date _____

If Decking, Ice Protection, Underlayment, and Flashing is concealed before inspection, the person responsible for concealing the Decking, Ice Protection, Underlayment and Flashing shall be responsible for all costs resulting from uncovering and replacing the covering material.