



# HISTORIC DISTRICT APPLICATION

INSPECTIONS . . . . . (248) 626-1601

DATE STAMP

32325 Franklin Rd • Franklin MI 48025-1199 • Phone (248) 626-9666 • Fax (248) 626-0538

The undersigned hereby applies for a permit to (describe project)

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Current market value of project \$ \_\_\_\_\_

**SUBMIT CHECKLIST WITH APPLICATION**

<b>I. LOCATION OF PROJECT</b>		Historic District ? <input type="checkbox"/> yes <input type="checkbox"/> no		Zoning District	
Address:					
Village: <p style="text-align: center;"><b>FRANKLIN</b></p>		Township: <p style="text-align: center;"><b>SOUTHFIELD</b></p>		County: <p style="text-align: center;"><b>OAKLAND</b></p>	
				Zip Code: <p style="text-align: center;"><b>48462</b></p>	
Between			And		
<b>II. PARCEL IDENTIFICATION #</b>					
<b>A. OWNER OR LESSEE</b>					
Name:				Telephone No:	
Address:		City:		State:	Zip Code:
<b>B. ARCHITECT OR ENGINEER</b>					
Name:				Telephone No:	
Address:		City:		State:	Zip Code:
License No:				Expiration Date:	
<b>C. CONTRACTOR</b>					
Name:				Telephone No:	
Address:		City:		State:	Zip Code:
License No:				Expiration Date:	
Federal Employer Number or Reason for Exemption:					
Worker's Comp Insurance Carrier or Reason for Exemption:					
MESC Employer Number or Reason for Exemption:					
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>					
<b>A. TYPE OF IMPROVEMENT</b>					
<input type="checkbox"/> New Building		<input type="checkbox"/> Addition / Remodel		<input type="checkbox"/> Demolition	
				<input type="checkbox"/> Property	
				<input type="checkbox"/> Other	
<b>B. REVIEW(s) TO BE PERFORMED</b>					
<input type="checkbox"/> Building / Trades		<input type="checkbox"/> Engineering		<input type="checkbox"/> Arborist	
				<input type="checkbox"/> Legal	
				<input type="checkbox"/> Other	

**IV. PERMIT PROPOSAL**

**A. RESIDENTIAL BUILDING – show most recent use**

- One Family                       Detached Condominium - number of units \_\_\_\_\_  
 Attached Garage                       Detached Garage                       Other (describe) \_\_\_\_\_

**B. NON-RESIDENTIAL BUILDING – show most recent use**

- Church, Religious                       Public Utility                       Restaurant  
 Service Station                       School, Library, Educational                       Grocery  
 Office, Bank, Professional                       Store, Mercantile                       Other (describe) \_\_\_\_\_

**C. PROPERTY – Describe proposal in detail** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. SELECTED CHARACTERISTICS FOR BUILDING PERMIT**

**A. PRINCIPAL TYPE OF FRAME**

- Masonry, Wall Bearing                       Wood Frame                       Structured Steel  
 Reinforced Concrete                       Other (describe) \_\_\_\_\_

**B. PRINCIPAL TYPE OF HEATING FUEL**

- Gas                       Oil                       Electricity                       Coal                       Other \_\_\_\_\_

**C. TYPE OF SEWAGE DISPOSAL**

- Pressure Sewer System                       Septic System

**D. TYPE OF WATER SUPPLY**

- Public or Private Company                       Private Well or Cistern

**E. TYPE OF MECHANICAL**

- Will there be air conditioning?    yes    no                      Will there be an elevator?    yes    no

**F. DIMENSIONS**

- First Floor (sq ft) \_\_\_\_\_                      Garage / Accessory (sq ft) \_\_\_\_\_  
Second Floor (sq ft) \_\_\_\_\_                      Total Building Area (sq ft) \_\_\_\_\_  
Basement (sq ft) \_\_\_\_\_                      Total Land Area (sq ft) \_\_\_\_\_

**G. NUMBER OF OFF-STREET PARKING SPACES**

- Enclosed \_\_\_\_\_                      Outdoors \_\_\_\_\_

**VI. APPLICANT INFORMATION:**

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

Name:		Telephone No.	
Address:	City:	State:	ZIP:

Federal ID no. (if applicable)

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.

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 this state relatina to persons who perform work on a residential building or a residential structure. Violators of Section

Signature of Applicant

Application Date

**VII. FOR INTERNAL USE ONLY**

	REQUIRED	APP / REJ	DATE	BY
A ~ BUILDING PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
B ~ CULVERT PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
C ~ FENCE PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
D ~ FLOODPLAIN PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
E ~ LANDFILL PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
F ~ SOIL EROSION PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
G ~ TREE REMOVAL PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
H ~ WETLANDS PERMIT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
I ~ HISTORIC DISTRICT	<input type="checkbox"/> Yes <input type="checkbox"/> No			
J ~ ZONING BOARD **	<input type="checkbox"/> Yes <input type="checkbox"/> No			

\*\* Zoning District \_\_\_\_\_ Required Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back  
 \_\_\_\_\_ Proposed Setback \_\_\_\_\_ Front \_\_\_\_\_ / \_\_\_\_\_ Side \_\_\_\_\_ Back

**VIII. VALIDATION**

**DATE STAMP**

Approved by:

(signature)

VILLAGE OF FRANKLIN BUILDING OFFICIAL

DATE STAMP

**HISTORIC DISTRICT CHECKLIST**

**14 COPIES EACH OF THE FOLLOWING:**

- \_\_\_ Completed Permit Application
  - \_\_\_ Proof of ownership (ie: copy of title insurance policy)
  - \_\_\_ Homeowner's Permit requires signed and dated Home Owner's Affidavit on file
  - \_\_\_ Builder's Registration – copy builder's license and driver's license on file
  
- \_\_\_ Copy of certified plot plan indicating:
  - \_\_\_ Dimensions of all property lines – indicate any easements
  - \_\_\_ Dimensions of existing and proposed work
  - \_\_\_ Setback dimensions of all yards
  - \_\_\_ Notation of any historic or natural resources on site
  - \_\_\_ Location of well and septic system
  
- \_\_\_ A descriptive text of the proposed work to be done
  
- \_\_\_ Application complies with Zoning Ordinance requirements?
  - \_\_\_ yes
  - \_\_\_ no – complete Zoning Appeals Application for review
  
- \_\_\_ Photographs of the existing conditions and/or structures being considered
  
- \_\_\_ Provide detail drawings, moldings, profiles, color samples, materials (etc.) to be used
  
- \_\_\_ Such further information as the Commission or Building Official may require

**PLEASE NOTE:**

- Applicant must be present at Historic District Commission meeting
- Permits must be obtained after Historic District Commission approval
- Applicant shall be responsible for 100% of all consultant fees incurred by the Village PLUS a 10% administration fee.