City of Melvindale

BUILDING DEPARTMENT

3100 Oakwood Boulevard • Melvindale, Michigan 48122

(313) 429-1060 • Fax (313) 383-3993 • www.melvindale.org

SPECIAL USE PERMIT

P_____ - _____
Issued: _____/_____/_____
Fees: $ _____
☐ Home Owner Permit
☐ Contractor Permit

Location of Property: _____

This property is: ☐ Residential: (☐ Single Family or ☐ Multiple Family) ☐ Commercial ☐ Industrial ☐ **RENTAL**
Type of Improvement: ☐ Addition ☐ Alteration ☐ Repair or Replacement ☐ Demolition ☐ Other _____
Cost of Improvement and Supplies: $ _____ **Ownership:** ☐ Private ☐ Public (Federal, State, or local gov.)

Applicants Name: _____
Company Name*: _____
Company Licensee: _____
Address: _____
City: _____
State: _____
Zip: _____
Phone 1: _____
Phone 2: _____
Email: _____

Property Owners Name: _____
Address: _____
City: _____
State: _____
Zip: _____
Phone 1: _____
Phone 2: _____
Email: _____

*All licensed contractors must be registered with the City of Melvindale to do work within the city limits regardless of permit status.

Select the following that apply: (If you don't see the job you are doing please ask our clerk for assistance.) See back for fees.

☐ Remove ☐ Replace ☐ Add ☐ Dumpster (2 week limit)

Please describe and illustrate work below and attach all valid work orders and proxy letters to this form.

Describe Work Here:

☐ I am not the owner of this property, nor the licensee of the business hired to do the work on behalf of the owner, but I am an authorized proxy applying for this permit on behalf of the ☐ Owner ☐ Licensed Contractor, and have supplied a copy of the letter signed by the, ☐ Owner ☐ Licensed Contractor, approving me to pull this permit and any paperwork related to this permit on their behalf. This approval was signed by (please print) _____ and expires on _____.

☐ 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 the authorized agent and we agree to conform to all applicable laws of this jurisdiction.

"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 a residential structure. Violators of section 23a are subjected to civil fines."

_____ _____
Signature of Applicant Date

ZONING PERMIT APPLICATION

☐ Check here to pay online.

FEES

CONCRETE OR ASPHALT	**ZONING PERMIT FEE**			
New and Replacement	$.15 per sq. ft. up to 500 sq. ft.	Minimum	$50.00	
Additional in excess of 500 sq. ft.:	$.10 per sq. ft.			

- **New Concrete or Asphalt requires preapproval**
- **Requires Form Inspection and Final Inspection**

COMMERCIAL:	$75.00	
INDUSTRIAL:	$100.00	
SUBTOTAL:		
Add all fees as listed above and put amount here:	SUBTOTAL:	
BASE FEE (applies to all permits)	$50.00	1
ADMINISTRATIVE FEE (applies to all permits)	$25.00	1
TOTAL:		
SUBTOTAL PLUS FEES	TOTAL:	

CONTRACTOR REGISTRATION:

All licensed contractors must be registered with the City of Melvindale to do work within the city limits.
No permit will be issued without proper registration.
Building Contractor Registrations expire annually on 5/31.
Registration fee: $15

WEBSITES:

CITY OF MELVINDALE BUILDING DEPARTMENT:
http://melvindale.org/city-services/building-department
(New updates coming soon!)

CITY OF MELVINDALE CODE ONLINE:
https://library.municode.com/mi/melvindale/codes/code_of_ordinances

EMAIL:
The City of Melvindale now offers the option of receiving automatic email notifications when your permits have been finalized. To sign up, remember to add your email address to your permit application.

All new cement and accessory structures must have preapproval from the building inspector prior to payment and issuance of permits. Building Application Reviews are completed on Wednesday and Friday mornings and results are available after 1pm the same day.

☐ **Approved** ☐ **Denied** ☐ **Pending** ☐ **Other:** _____

Inspector Notes:

Building Inspector Signature _____ Date _____