

Inspector  
Name: George Brown  
Phone: (989) 770-9915  
Applicant's responsibility to  
contact inspector for each phase  
of construction.

ALBEE TOWNSHIP  
SAGINAW COUNTY, MICHIGAN  
**CONSTRUCTION PERMIT**

Permit No. \_\_\_\_\_

ADDRESS \_\_\_\_\_ Date \_\_\_\_\_  
St. City Zip

In accordance with the provisions of PA. 230 of 1972 as amended and the Ordinances for the Township of Albee, the Housing Code, Plumbing Code and Electrical Code of the State of Michigan and all other laws, rules and regulations applicable thereto, and as amended, application is hereby made for the construction of the following described building or project:

TYPE OF CONSTRUCTION: Residential  Commercial  Agricultural  Industrial

LOCATION: Lot \_\_\_\_\_ Block \_\_\_\_\_ Zone \_\_\_\_\_ Section \_\_\_\_\_

or other description \_\_\_\_\_

Corner  or Interior Lot  Lot Size \_\_\_\_\_

Side Lines: Left \_\_\_\_\_ Right \_\_\_\_\_ Rear Line \_\_\_\_\_ Front Line \_\_\_\_\_

Dwelling: Single  2 Family  Multiple

Foundation:  Basement: Full  Part  Solid Wall  Cement Posts

Exterior Covering \_\_\_\_\_ Roof Covering \_\_\_\_\_

Building Size \_\_\_\_\_ Square Footage \_\_\_\_\_ Stories \_\_\_\_\_

Nature of Construction:

New  Remodel  Re-location  Demolish

Extent of Construction: \_\_\_\_\_

This Application is made upon the express condition that said construction shall in all respects conform to the ordinances of Albee Township, regulating construction and uses of land, and all State law applicable thereto and the approval thereof and issuance of permit shall not be construed as a release of applicant, owner, contractor or agent, from full compliance, and any non-compliance or approval by the Building Inspector of construction made shall not be binding upon the Village Board or Boards of Appeals if the construction or use of the premises is contrary to the Provisions of the Village Ordinances, State Law or any rule or regulation applicable thereto.

Contractor \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_

Signature \_\_\_\_\_ Computed Cost \_\_\_\_\_  
Owner or Contractor

Permit Fee \_\_\_\_\_

Application Accepted By \_\_\_\_\_