



15185 Algoma Ave., NE  
Cedar Springs, MI 49319  
PH: 616-696-1718 FAX: 616-696-3970

**TEMPORARY BUILDING PERMIT APPLICATION**

1. Description of Temporary residential building project:

\_\_\_\_\_

2. Permanent Parcel Number: 41-02- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

3. Confirmed Street Address (from tax roll or driveway permit): \_\_\_\_\_

\_\_\_\_\_

Estimated time of use of For Temporary Residential Building (*may not exceed 6 months*) \_\_\_\_\_

5. Applicant's Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Your application must be accompanied by:**

- A copy of your contractors license and a completed Solon Township contractor's registration form.
- A signed affidavit from the land owner stating that they fully understand the temporary time restriction of this permit. Include the length of time estimated for the use of the temporary residence. (ATTACHED TO THIS APPLICATION)

- 6. Will you be performing the building of the structure yourself? (Please circle one.) Yes  No
- 7. Will you be performing the electrical work yourself? (Please circle one.) Yes  No
- 8. Will you be performing the plumbing work yourself? (Please circle one.) Yes  No
- 9. Will you be performing the mechanical work yourself? (Please circle one.) Yes  No

**\* If you are hiring individuals for the above work, they must be licensed contractors who are registered with the township.**

10. During the process of building, you will have to call for inspections. The following inspections are necessary:

- Initial
- Rough-in
- Final
- Violation Compliance (if necessary)

- A. **Building Inspections:** Call Robert Ellick at 616-696-1718.
- B. **Electrical Inspections:** The first inspection is made upon completion of the rough-in. Power will not be hooked up by the utility company until payment of permit fees and inspection by the electrical inspector have been made. The inspector will call the utility company for hook-up. Call Colt Jacobs at 616-318-2964.
- C. **Plumbing Inspections:** The first inspection is made upon completion of the rough-in. (Underground and/or structural). Call Dave Cooley at (616) 447-0878.
- D. **Mechanical Inspections:** The first inspection is made upon completion of the rough-in. (Underground and/or structural). Call Dave Cooley at (616) 447-0878.

**FEE SCHEDULE/ESCROW AGREEMENT**

Please include a check for \$100.00 made out to Solon Township. CHECK # \_\_\_\_\_ CASH \_\_\_\_\_

Please include a check for \$2,000.00 made out to Solon Township. CHECK # \_\_\_\_\_ CASH \_\_\_\_\_

**The home-owner and/or builder is/are responsible to meet and uphold all ordinances of Solon Township. (Zoning Ordinance Books are available at the township offices for \$25.00)**

**Return all pages of this signed, completed form to the township office.**

_____ <i>Applicant's Signature</i>	_____ <i>Date</i>
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_____ TOWNSHIP OFFICIAL	_____ DATE RECEIVED
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