



APPLICATION FOR BUILDING PERMIT

CITY OF WALKER
 COMMUNITY DEVELOPMENT DEPARTMENT
 4243 REMEMBRANCE RD NW
 WALKER MI 49534
 (616) 791-6858
cdd@walker.city

| | |
|--|---------------------|
| | DATE OF APPLICATION |
|--|---------------------|

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|-------------------------------|
| 1. LOCATION OF PROJECT |
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| | |
|---------|-------------------------|
| ADDRESS | PROJECT / BUSINESS NAME |
| CITY | STATE |
| | ZIP |

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| 2. PROPERTY OWNER OR LESSEE (if property owner is applicant check here <input type="checkbox"/>) |
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| | | |
|---------|-------|-------|
| NAME | PHONE | EMAIL |
| ADDRESS | CITY | STATE |
| | | ZIP |

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| 3. CONTRACTOR INFORMATION (if contractor is applicant check here <input type="checkbox"/>) |
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|--|-----------|-------|
| NAME | PHONE | EMAIL |
| ADDRESS | CITY | STATE |
| | | ZIP |
| BUILDERS LICENSE | EXP. DATE | |
| FEDERAL EMPLOYER ID NUMBER (or reason for exemption) | | |
| WORKERS COMP INSURANCE (or reason for exemption) | | |
| MESO EMPLOYER NUMBER (or reason for exemption) | | |

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| 4. INCLUDED IMPROVEMENTS (a separate application must be submitted for each trade) |
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ELECTRICAL
 MECHANICAL
 PLUMBING
 FIRE PROTECTION

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| 5. PROJECT DESCRIPTION (check all that apply) |
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RESIDENTIAL

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|---|--|---|
| <input type="checkbox"/> NEW SINGLE FAMILY | <input type="checkbox"/> DECK / DECK ADDITION | <input type="checkbox"/> FOUNDATION ONLY |
| <input type="checkbox"/> NEW TWO-FAMILY | <input type="checkbox"/> SWIMMING POOL / SPA | <input type="checkbox"/> ALTERNATIVE ENERGY |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> ACCESSORY BUILDING | <input type="checkbox"/> MOBILE HOME SET UP |
| <input type="checkbox"/> REMODEL / ALTERATION | <input type="checkbox"/> ACCESSORY BLDG ADDITION | <input type="checkbox"/> DEMOLITION |

NON-RESIDENTIAL

| | | |
|--|---|---|
| <input type="checkbox"/> NEW CONSTRUCTION | <input type="checkbox"/> MULTI-FAMILY | <input type="checkbox"/> DEMOLITION |
| <input type="checkbox"/> REMODEL/ADDITION/ALTERATION | <input type="checkbox"/> ACCESSORY BUILDING | <input type="checkbox"/> ALTERNATIVE ENERGY |
| <input type="checkbox"/> SIGN | <input type="checkbox"/> FOUNDATION ONLY | <input type="checkbox"/> WIRELESS COMMUNICATION FACILITY MODIFICATION |

PROPOSED USE:

DESCRIPTION OF PROJECT:

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| 6. PROJECT VALUATION (including labor) |
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\$ _____

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| 7. DIMENSIONS / DATA |
|-----------------------------|

| FLOOR AREA | EXISTING | ALTERATIONS | NEW |
|---|----------|-------------|-----|
| BASEMENT | | | |
| 1 ST & 2 ND FLOOR | | | |
| 3 RD FLOOR & ABOVE | | | |
| TOTAL AREA | | | |

