



**GRAND BLANC TOWNSHIP BUILDING DEPARTMENT  
OCCUPANCY PERMIT APPLICATION  
PERMIT FEE: \$300.00**



5371 S. Saginaw Street • P.O. Box 1833 • Grand Blanc, MI 48480

Administrative: (810) 424-2782 or (810) 424-2630 • Inspection Line: (810) 424-2690 • Fax: (810) 424-2783

**PROPERTY INFORMATION:**

Property Address: \_\_\_\_\_ PID#: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Property Owner Phone: \_\_\_\_\_

**APPLICANT INFORMATION:**

To pull an occupancy permit you must be the owner of the property or a representative of the owner, such as the listing real estate agent. I am the  Property Owner  Owner Representative.

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

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

\_\_\_\_\_ Cell Phone: \_\_\_\_\_

**ADDITIONAL INFORMATION / DISCLOSURE(S):**

**GENERAL:** Construction / Work shall not be started until the permit has been approved and issued. All construction shall be in compliance with the building code currently in effect. No work shall be concealed until it has been inspected. Contact with a Code Enforcement Officer is highly recommended.

**INSPECTIONS:** All inspections must be called into the inspection line, (810) 424-2690 by 7:00 am the day you are requesting your inspection. Inspections are performed Monday through Thursday only. The request must include the job location, permit number and lock box access if necessary.

**PERMIT FEES:** Applicant is responsible for the payment of all fees and charges applicable to this application. Fee for the Occupancy Permit is \$300.00 and must be made payable to the Charter Township of Grand Blanc. Additional permit fees and inspection fees may be required before Occupancy is issued.

**EXPIRATION OF PERMIT:** A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work. CANCELLED PERMITS WILL NOT BE REFUNDED OR REINSTATED.

**DISCRIMINATION:** This Department Will Not Discriminate Against Any Individual Or Group Because Of Race, Sex, Religion, Age, National Origin, Color, Martial Status, Handicap Or Political Beliefs.

AUTHORITY - Public Act 230 of 1972, As Amended COMPLETION - Mandatory To Obtain Permit PENALTY - Permit Cannot Be Issued

**APPLICANT SIGNATURE:**

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/her 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.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**FOR BUILDING DEPARTMENT USE ONLY:**

Application Approved As Submitted

Application Denied As Submitted Do To:

Approval Signature: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_

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