

**Oscoda County Building Department**  
**206 E. 8<sup>th</sup> Street**  
**PO Box 399**  
**Oshtemo MI 48647**  
**(989) 826-1164**

---

**Requirements for Obtaining Building Permits**

**Residential Structures**

(One and Two-Family Residential with less than 3,500 square feet of calculated floor area)

- Application for Building Permit
- Minimum of two (2) sets of plans that include the following
  - Foundation and floor plans.
  - Roof and wall section.
  - Building elevations.
  - Site plan.

**Mobile and Premanufactured Homes**

- Application for Building Permit.
- Minimum of two (2) sets of plans for the foundation and the method of anchoring the unit to the foundation.
- Site plan.
- For Michigan approved premanufactured units; one (1) copy of the Building System Approval and the approved plans.

**Instructions for Completing Application**

Page 1 of the application: Complete all applicable sections. Note section II(c). If the homeowner is doing the construction enter "Homeowner" in the contractor information space.

Page 2 of the application: Enter the information as required.

Page 3, Section VI of the application: Must be completed by the permit applicant and **signed**.

Section VII. Must be completed by the local government agency (city/township) for zoning (environmental) approval. Note (g) and (h). Indicate whether a well or septic approval is required. Well and septic permits are typically issued by the county health department (989) 826-3970.

## **Building Permit Fees**

Building permit fees may be obtained from the Oscoda County Building Department by calling (989) 826-1164.

### **You will need to furnish the following information when calling**

- Total square footage of each individual floor, garage, decks etc.

If you submit your building permit application and plans without money, your application will be put on hold until all fees are received.

### **When to Call for an Inspection**

Please call the building department's phone number at least 24 hours prior to the time you need an inspection. A minimum of three (3) inspections is required on most structures. It is the permit holders' responsibility to call for inspections, prior to the construction being covered.

#### **Foundation Inspection**

Footing inspection – Prior to placing concrete in piers, trenches and framework.

Backfill inspection – Prior to backfill and after the footings, walls, waterproofing, and drain tile are installed.

#### **Rough Inspection**

The rough inspection is to be made after the roof, all framing, fire stopping, bracing, electrical, mechanical, and plumbing rough installations are in place, and before the insulation is installed.

#### **Final Inspection**

The final inspection is to be made upon completion of the building or structure, and before occupancy occurs.

#### **Certificate of Occupancy**

A new building or a building that is altered shall not be used or occupied until a Certificate of Occupancy is issued by the code official. The permit holder or their authorized agent must request a Certificate of Occupancy upon the complete of the project. A Certificate of Occupancy cannot be issued until all permits are finalized and the work covered by a building permit has been completed in accordance with the permit, the code, and other applicable laws and ordinances.



**OSCODA COUNTY**  
**APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION**  
 Building Department  
 P.O. Box 399  
 Mio, MI 48647  
 (989) 826-1164 ~ Fax: 826-1137

AUTHORITY: P.A. 230 OF 1972, AS AMENDED  
 COMPLETION: MANDATORY TO OBTAIN PERMIT  
 PENALTY: APPLICATION MUST BE COMPLETED, SIGNED  
 PROPER FEE ENCLOSED OR PERMIT WILL NOT BE  
 ISSUED.

OSCODA COUNTY WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL ORIGIN, COLOR, MARITAL STATUS, HANDICAP, OR POLITICAL BELIEFS.

APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V AND VI  
 NOTE: SEPARATE APPLICATIONS MUST BE MADE TO THE APPROPRIATE DIVISION  
 FOR PLUMBING, MECHANICAL AND ELECTRICAL WORK PERMITS

**ARE YOU BUILDING WITHIN 500 FEET OF A LAKE, STREAM OR WATERWAY? \_\_\_ YES \_\_\_ NO**

<b>I. LOCATION OF PROJECT</b>			
ADDRESS			
CITY/VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
<b>II. IDENTIFICATION</b>			
<b>A. OWNER OR LESSEE</b>		Property Tax ID#	
NAME		TELEPHONE NO.	
MAILING ADDRESS	CITY	STATE	ZIP CODE
<b>B. ARCHITECT OR ENGINEER</b>			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NUMBER		EXPIRATION DATE	
<b>C. CONTRACTOR</b>		E-Mail	
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
BUILDERS LICENSE NUMBER		EXPIRATION DATE	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION			
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION			
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION			
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>			
<b>A. TYPE OF IMPROVEMENT</b>			
<input type="checkbox"/> NEW RESIDENCE	<input type="checkbox"/> ADDITION	<input type="checkbox"/> ACCESSORY BUILDING	<input type="checkbox"/> ALTERATIONS/REPAIR
<input type="checkbox"/> MOBILE HOME SETUP	<input type="checkbox"/> MANUFACTURED HOME	<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> GARAGE
<input type="checkbox"/> DECK	<input type="checkbox"/> OTHER	<input type="checkbox"/> WRECKING	<input type="checkbox"/> FOUNDATION ONLY
<input type="checkbox"/> RE-ROOF			
<b>B. REVIEW(S) TO BE PERFORMED</b>			
<input type="checkbox"/> BUILDING	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> ELECTRICAL
			<input type="checkbox"/> FOUNDATION

IV. SELECTED CHARACTERISTICS OF BUILDING	
A. PRINCIPAL TYPE OF FRAME	
<input type="checkbox"/> MASONRY, WALL BEARING <input type="checkbox"/> WOOD FRAME <input type="checkbox"/> STRUCTURAL STEEL BEARING	<input type="checkbox"/> REINFORCED CONCRETE <input type="checkbox"/> OTHER <input type="checkbox"/>
B. PRINCIPAL TYPE OF HEATING FUEL	
<input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECTRICITY	<input type="checkbox"/> COAL <input type="checkbox"/> OTHER <input type="checkbox"/>
C. TYPE OF SEWAGE DISPOSAL	
<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY <input type="checkbox"/> PRIVATE WELL OR CISTERN	
D. TYPE OF WATER SUPPLY	
<input type="checkbox"/> PUBLIC OR PRIVATE COMPANY <input type="checkbox"/> PRIVATE WELL OR CISTERN	
E. DIMENSIONS _____ x _____ =	
	Sq. ft.
Number of Stories	FLOOR AREA 1 <sup>ST</sup> FLOOR
	2 <sup>ND</sup> FLOOR
	GARAGE AREA
	DECK/PORCH AREA
ESTIMATED COST	TOTAL AREA
V. PROPOSED USE OF BUILDING	
A. RESIDENTIAL	
<input type="checkbox"/> ONE FAMILY <input type="checkbox"/> TWO OR MORE FAMILIES (NO OF UNITS _____) <input type="checkbox"/> HOTEL/MOTEL (NO OF UNITS _____)	<input type="checkbox"/> ATTACHED GARAGE <input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> OTHER
B. NON-RESIDENTIAL	
<input type="checkbox"/> AMUSEMENT <input type="checkbox"/> CHURCH, RELIGION <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> PARKING GARAGE <input type="checkbox"/> PUBLIC UTILITY <input type="checkbox"/> SERVICE STATION	<input type="checkbox"/> SCHOOL, LIBRARY, EDUCATIONAL <input type="checkbox"/> STORE, MERCANTILE <input type="checkbox"/> TANKS, TOWERS <input type="checkbox"/> HOSPITAL, INSTITUTIONAL <input type="checkbox"/> OFFICE, BANK PROFESSIONAL <input type="checkbox"/> OTHER
NONRESIDENTIAL - DESCRIBE IN DETAIL PROPOSED USE OF BUILDING, E.G. FOOD PROCESSING PLANT, MACHINE SHOP, LAUNDRY BUILDING AT HOSPITAL, ELEMENTARY SCHOOL, SECONDARY SCHOOL, COLLEGE, PAROCHIAL SCHOOL, PARKING GARAGE FOR DEPARTMENT STORE, RENTAL OFFICE BUILDING, OFFICE BUILDING AT INDUSTRIAL PLANT. IF USE OF EXISTING BUILDING IS BEING CHANGED, ENTER PROPOSED USE.	
C. TYPE OF MECHANICAL	
WILL THERE BE AIR CONDITIONING: _____ YES _____ NO	
WILL THERE BE AN ELEVATOR? _____ YES _____ NO	

**VI. APPLICANT INFORMATION**

**APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION.**

NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE

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 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.

SECTION 23A OF THE STATE CONSTRUCTION CODE ACT OF 1972, ACT NO. 230 OF THE PUBLIC ACTS OF 1972, BEING SECTION 125.1523A OF THE MICHIGAN COMPILED LAWS, 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 SUBJECT TO CIVIL FINES.

**FEE ENCLOSED \$**

**SIGNATURE OF APPLICANT**

**VII. LOCAL GOVERNMENTAL AGENCY TO COMPLETE THIS SECTION****ENVIRONMENTAL CONTROL APPROVALS**

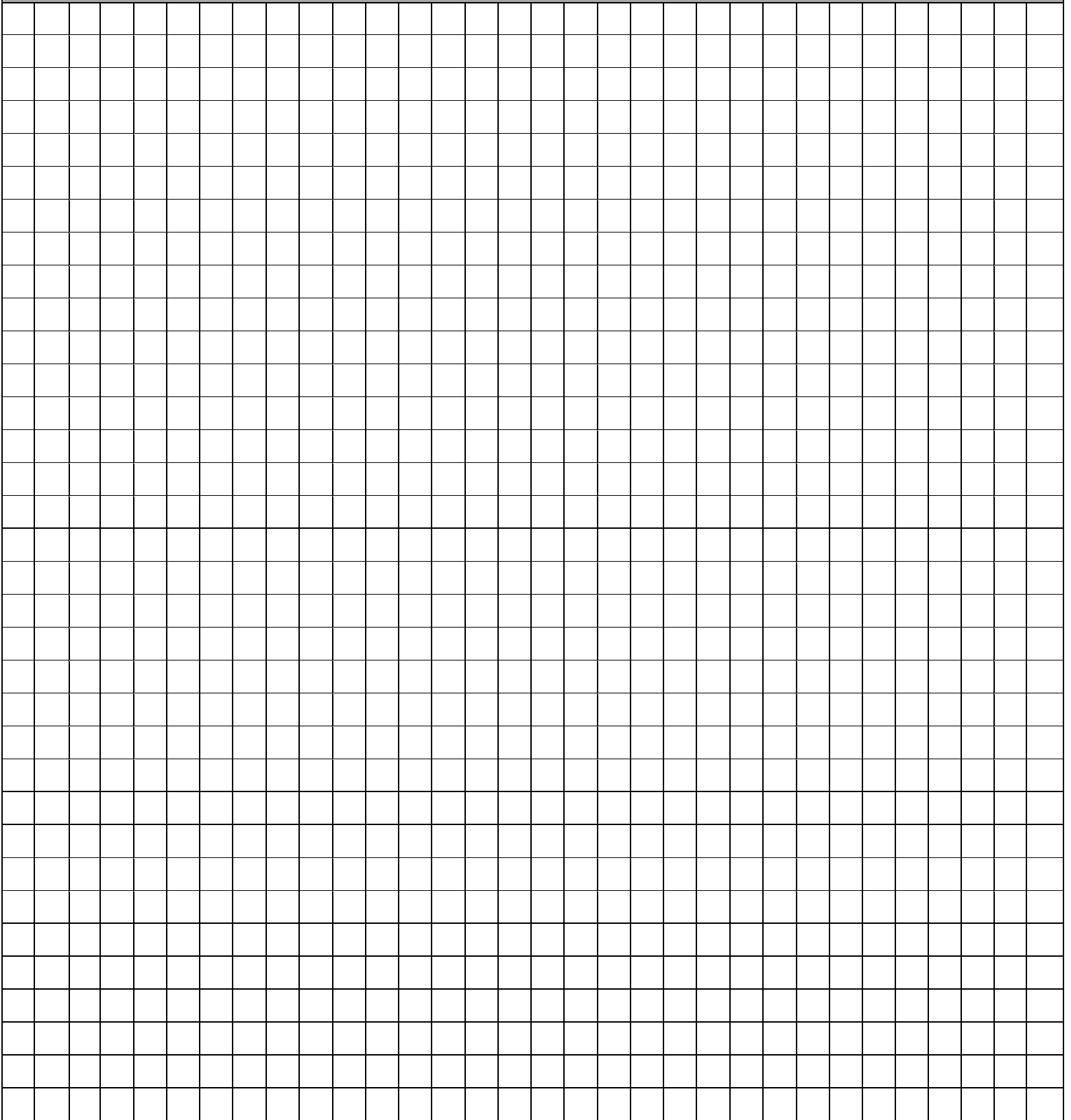
	REQUIRED?	APPROVED	DATE	NUMBER	BY
<b>A - ZONING</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>B - FIRE DISTRICT</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>C - POLLUTION CONTROL</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>D - NOISE CONTROL</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>E - SOIL EROSION</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>F - FLOOD ZONE</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>G - WATER SUPPLY</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>H - SEPTIC SYSTEM</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>I - VARIANCE GRANTED</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<b>J - OTHER</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO				

**VIII. VALIDATION - FOR DEPARTMENT USE ONLY**

NOTES AND DATA

BUILDING PERMIT NUMBER	APPROVAL SIGNATURE
ISSUE DATE	
PERMIT FEE	
	TITLE

**IX. SITE OR PLOT PLAN - FOR APPLICANT USE**



**INDICATE DIRECTION OF NORTH WITHIN THE CIRCLE:**

Blank space for indicating the direction of North within a circle.