

**Application for Plan Examination**  
 Michigan Department of Licensing and Regulatory Affairs  
 Bureau of Construction Codes / Plan Review Division  
 P.O. Box 30255, Lansing, MI 48909  
 517-241-9328  
 www.michigan.gov/bcc

Agency Use Only

**Deposit Fee: \$125.00** (the first \$125.00 of an application is non-refundable)

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Authority: 1972 PA 230 Completion: Voluntary Penalty: Plans will not be reviewed	LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
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**PROJECT OR FACILITY INFORMATION**

FACILITY NAME	STREET / SITE ADDRESS
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH FACILITY IS LOCATED	
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township    Of: _____	COUNTY

**APPLICANT/FACILITY CONTACT INFORMATION** (Note: All correspondence will be sent to this address)

NAME OF COMPANY	APPLICANT NAME	FEIN OR SS NO.* (Required)
ADDRESS	CITY	STATE
		ZIP CODE
EMAIL ADDRESS		TELEPHONE NUMBER (Include Area Code)
		FAX NUMBER (Include Area Code)

**PLAN REVIEW INFORMATION**

GROSS FLOOR AREA

New Building \_\_\_\_\_   
  Addition \_\_\_\_\_   
  Alteration \_\_\_\_\_   
  Repair \_\_\_\_\_

CLASSIFICATION PER BUILDING CODE

Building Use \_\_\_\_\_   
 Construction Type \_\_\_\_\_   
 No. of Occupants \_\_\_\_\_   
 Area/Floor \_\_\_\_\_   
 No. of Floors \_\_\_\_\_

FIRE SPRINKLERS

Entire Building     Limited Area \_\_\_\_\_     None

Government Project Cost Less Than \$15,000.00   
 Project Description \_\_\_\_\_

Addendum No. \_\_\_\_\_   
  Bulletin No. \_\_\_\_\_   
 Original Project No. \_\_\_\_\_

**PLAN REVIEW REQUESTED**

Two (2) sets of construction documents required

Building (includes barrier free)   
  Electrical   
  Mechanical   
  Plumbing   
  Other \_\_\_\_\_

Barrier Free   
  Footing / Foundation   
  Fire Sprinkler   
  Energy

**BUILDING OWNER**

NAME (Company or Individual)	CONTACT PERSON	TELEPHONE NUMBER (Include Area Code)
ADDRESS	CITY	STATE
		ZIP CODE
		FAX NUMBER (Include Area Code)

**PROJECT ARCHITECT / ENGINEER**

NAME OF COMPANY	LICENSED INDIVIDUAL	MICHIGAN LICENSE NUMBER
ADDRESS	CITY	STATE
		ZIP CODE
		TELEPHONE NUMBER (Include Area Code)

**SIGNATURE**

APPLICANT SIGNATURE (Must be an original signature)	DATE
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\*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

## Instructions for Application for Plan Examination

**Facility Information:** Provide all requested information. Mark the appropriate box (city, village or township) and state the name of the governmental subdivision where the project is located; not the post office location.

**Applicant Information:** Provide all requested information with an original signature. All correspondence will be sent to this address, and this entity will be responsible for all fees.

**Plan Review Information:** Provide all requested information. The building use, construction type and number of occupants shall be as prescribed by the building code.

**Plan Review Requested:** Mark all plan reviews desired or required.

**Project Architect / Engineer:** Provide all requested information.

### Required Submittals for Plan Review

For each facility, submit completed application, \$125.00 (*the first \$125.00 of an application is non-refundable*) deposit fee made payable to the **State of Michigan** and two (2) sets of plans and/or specifications with **original seals and signatures** in accordance with 1980 PA 299. Fire sprinkler shop drawings and computations are not required to be sealed by a design professional.

**Building Code:** Site plan, foundation plan, soil bearing capacity, floor plans, building elevations, building sections, framing plans, details, roof plan, roof finish schedule, door schedule, roof live and dead loads.

**Electrical Code:** Plans for all electrical systems using more than six (6) circuits, except one- and two-family dwellings shall include lighting layout, circuiting, switching, conductor and raceway sizes, wattage schedule, service location and riser diagram, load calculations, appropriate plans showing standard symbols of all electrical equipment.

**Mechanical Code:** Plans indicating heating equipment, air conditioning equipment, ductwork material and layout, fire dampers, ventilation of rooms and areas, location of chimneys and vents, piping layouts.

**Plumbing Code:** Site plan, floor plans DMW riser diagrams and water distribution system and roof plan. Show direction of flow, pipe sizes, grade of horizontal piping, elevations, drainage fixture unit loading of both stacks and drains in the DWV system, supply fixture unit load for the water system, branch supplies serving more than one plumbing fixture, appliance or hose outlet.

**Energy Code:** Floor plans, building sections, details, average annual degree days, exterior envelope component materials, "U" values of elements, "R" values of insulating materials, size and type of apparatus and equipment, energy calculations.

### Upon Receipt of All Applications

Written confirmation will be sent to the applicant. Further correspondence, concerning the requested plan reviews, will be sent to the applicant and the project architect/engineer, if one is provided.

#### U.S. Postal Service

MI Dept. of Licensing and Regulatory Affairs  
Bureau of Construction Codes  
Plan Review Division  
P.O. Box 30255  
7150 Harris Drive  
Lansing, MI 48909

#### Courier Other Than U.S. Postal Service

MI Dept. of Licensing and Regulatory Affairs  
Bureau of Construction Codes  
Plan Review Division  
2501 Woodlake Circle  
Okemos, MI 48864

Validation Area