## **BUILDING PLAN REVIEW APPLICATION**

_	Watervliet, M	815 Territorial Road I 49098 x: 269-468-3498
Ross Rogien – Bui	lding Inspector/Pla	n Review/Zoning Administrator
PROJECT NAME:		
PROJECT ADDRESS:		
PROPERTY TAX NO.:		
OWNER(S) NAME & ADDRES	S:	
APPLICANT NAME & ADDRES	S:	
APPLICANT PHONE, FAX & E	-MAIL ADDRESS: _	
	PROJECT INFOR	RMATION
NEW	EXISTING	DEMO REQUIRED
If demolition is required, please Work description on page 2.	indicate to what exte	ent you will perform work as part of Scope of
	se indicate any assoc	City Planning Commission or other State ciated correspondence relative to this project ie).
Building Area (list each floor) _		
Total Height of Roof and/or app	ourtenances	
Is fire sprinkling system to be ut	tilized -	Stand Pipe Req
Type of Const. Proposed:		Use/Occupancy:

PLAN REVIEW APPLICATION-CONTINUED

SCOPE OF WORK: Include basic details regarding general site work and include preliminary site plan showing property lines and any structures with 75' of the property lines at all sides. Give details relative to ALL FLOORS. Indicate drainage system for roof structures, parking, and building perimeter as applicable.

Will any SPECIAL INSPECTIONS or CERTIFIED TESTING be required during the course of this project? If so, please give list of anticipated services.

Estimated Project Cost: \$	***Review Fee:
*Fee is due with application – calculated at 60% of permit fee.	
Submitted by:	Date:
*Please include three (3) sets of drawings for review work.	

\*HVAC, Electrical, and Fire Protection req. separate reviews – An additional set of Detail Drawings is required for each of those services.