Date Received_____

City of Wyoming Inspections Department

Application for Plan Examination and Commercial - Industrial - Institutional Building Permit

1155 28th St. SW P.O. Box 905
Wyoming, MI 49509-0905
Telephone (616) 530-7285
Fax (616) 249-3484

Applicant Instructions: Complete parts I - VI of this form. Submit form and three sets of complete plans and and specifications (one sealed) for review. Special Inspections may also be required per the MBC 2012 Building Code Section 1704.0. Contact your architect for instructions. Special Inspection forms are from the Inspections Department for review No Permit Refunds

I. LOCATION OF BUILDING

AT (LOCATION)_____
(NO.) (STREET)

NAME OF BUSINESS_____

II. TYPE OF BUILDING

1 ☐ New Building
2 ☐ Addition
3 ☐ Alteration
4 ☐ Repair, replacement
5 ☐ Foundation only

III. PROPOSED USE - Nonresidential (continued below left)

1 ☐ Amusement, recreational
2 ☐ Church, other religious
3 ☐ School, library, other educational
4 ☐ Parking garage or lot
5 ☐ Service station, repair garage
6 ☐ Hospital, institutional
7 ☐ Office, bank, professional
8 ☐ Public utility
9 ☐ Industrial
10 ☐ Stores, mercantile
11 ☐ Tanks, towers
12 ☐ Other - SPECIFY

Nonresidential - Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, industrial facility, rental office building, office building at industrial plant, etc. If use of existing building i being changed, enter proposed use.

IV. COST

	(Omit cents)
Cost of improvement…….	$
To be installed, but not included in the above cost	
a. Electrical……..	
b. Plumbing……..	
c. Heating, air conditioning…….	
d. Other (elevator, site construction, etc.)	
_____	
_____	
TOTAL COST OF PROJECT (Land value not included.)	$

V. SELECTED CHARACTERISTICS OF BUILDING

PRINCIPAL TYPE OF FRAME	DIMENSIONS	
1 ☐ Masonry (wall bearing) 2 ☐ Wood frame 3 ☐ Structural steel 4 ☐ Reinforced concrete 5 ☐ Other - SPECIFY _____	Number of stories…… *Total square feet of floor area, all floors, based on exterior dimensions*…… 1st floor…….. 2nd floor…… 3rd floor…… Total area, sq. ft……	

PRINCIPAL TYPE OF ROOF FRAME	MBC 2012 Use Group (Chap.3)
1 ☐ Steel beams 2 ☐ Bar joist 3 ☐ Pre-engineered building Manufacturer name_____ 4 ☐ Wood truss 5 ☐ Other - SPECIFY _____	_____ **MBC 2012 Construction Type (Chap.6)** **(circle one)** IA ◯ IB ◯ IIA ◯ IIB ◯ IIC ◯ IIIA ◯ IIIB ◯ IV ◯ VA ◯ VB ◯
	Fire Suppression System _____ **Total Land Area (sq. ft.)** _____

VI. IDENTIFICATION

	Name	Mailing address - *Number, street, city, and state*	Zip code	Telephone No.
1. Owner or Lessee E-mail				
2 Contractor E-mail				
3. Architect or Engineer E-mail				

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 this jurisdiction.

Application Date		Signature of Applicant		Address	

Print Form

Inspection Dept. staff use only. Applicant: DO NOT WRITE BELOW THIS LINE

PLAN REVIEW RECORD - *For office use*				
Plan Review Required	Check	Date Plans Approved	By	Notes
BUILDING				
PLUMBING				
MECHANICAL				
ELECTRICAL				
PLANNING DEPT				
ENGINEERING DEPT				
FIRE DEPT				
INDUSTRIAL TREATMENT				

ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS				
Permit or Approval	Check	Date Obtained	Number	By
BOILER (STATE MI)				
CURB OR SIDEWALK CUT (ENG)				
DEQ (STATE MI)				
ELEVATOR (STATE MI)				
ELECTRICAL				
FIRE SUPPRESSION				
GRADING				
HEALTH DEPT (KENT COUNTY)				
MECHANICAL				
PLUMBING				
SIGN OR BILLBOARD				
BOARD OF ZONING APPEALS				
OTHER				

Permit To: _____

_____

_____

_____

_____

VALIDATION - Building				
Permit Value		Use Group		Approved for building permit by:
Fee				
25% Plan Review		Type Construction		
Deposit*				
		Occupancy Load		(TITLE)
TOTAL				

*Deposit, if applicable, may be refundable if permit does expire, and number of required inspections are not exceeded

CITY OF WYOMING INSPECTIONS DEPARTMENT

Statement of Special Inspections in compliance with MBC 2012 Building Code Section 1704.0 etc.

Prepare by Architect/Engineer and submit by Permit Applicant before issuance of permit.
Owner shall provide for special inspection services.

Project:	Location:
Owner:	
Architect:	
Construction Operations	**Check if Required**
Fabricator's Shop	
☐ Wood Trusses _____	
☐ Steel Fabrications _____	
☐ Precast Concrete _____	
Inspection agency to submit certification of compliance.	
Steel Construction	
Shop	
Materials	
High Strength Bolts	
Welds	
Details	
Concrete Construction	
Materials	
Rebar/pretensioning steel	
Formwork	
Strength	
Mix	
Placement	
Curing	
Prestressing	
Grouting	
Precast Erection	
Masonry Construction	
Materials	
Strength	
Mix	
Mortar/Grout & Application	
Reinforcement	
Cold Weather Protection	
Anchorage	
Wood Construction - Specify	
Soils	
Site prep	
Fill placement	
Spray Fire Proofing	
EIFS	

NOTICE TO SPECIAL INSPECTORS: You are required to keep records of all inspections and to furnish a copy of such records to the Building Official upon request. All discrepancies shall be brought to the immediate attention of the contractor or fabricator for correction. If the discrepancies are not corrected within a reasonable time, the discrepancies shall be brought to the attention of the code official and to the registered design professional of record. A final summary report that indicates the scope of your inspections and the work was completed in accordance with the approved plans, specifications, and the applicable standards shall be submitted prior ro the issuance of the certificate of occupancy.

A. SOILS/ SITE PREPARATION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

B. CONCRETE CONSTRUCTION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

C. MASONRY CONSTRUCTION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

D. STEEL FABRICATION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

E. STEEL ERECTION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

F. PRECAST CONCRETE FABRICATION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

G. PRECAST CONCRETE ERECTION	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

H. FABRICATION WOOD	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

I. OTHER:	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

J. OTHER:	
NAME OF INSPECTION FIRM:	
ADDRESS:	
PHONE:	FAX:

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CITY OF WYOMING INSPECTIONS DEPARTMENT

FIRE PENETRATION PROTECTION AFFIDAVIT

TO:_____ Permit No.:_____

_____ _____

Address of Job Site

_____ _____

Building Inspections Department *Business Name of Job Site*

I, _____, the agent for_____

License # _____ hereby certify that all penetrations through rated walls, ceilings, floors and other barriers resulting from the passage of pipes, conduits, buss ducts, cables, wires, air ducts, pneumatic ducts, construction joints and opening, and penetrations from similar building service equipment installed in connection with the above permit has been protected by approved systems, materials, and/or devices meeting the accepted criteria of the American Society of Testing Materials (ASTM E814) and have been installed by qualified persons in accordance with the manufacturer's specifications and in compliance with the MBC 2012 Building Code.

_____ _____ _____

Print Name and Title *Signature* *Date*

_____ _____ _____

Firm *Address* *Phone*

Witnessed By: _____ _____ _____

Print Name *Signature* *Date*

To be given to the Building Inspector at the time of the rough in inspections and/or prior to installation of finish materials which prevent adequate inspection.
Required for certificate of occupancy.

INSPECTOR INFORMATION

Jeff Keppel, Building Official
1155 28th St. S.W.
Box 905
Wyoming, MI 49509-0905
Email: KeppelJ@wyomingmi.gov
Web. www.wyomingmi.gov
Phone: (616) 530-7294
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Jerry Payne, Mechanical Inspector
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Tim Hannan, Plumbing Inspector
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Phone: (616) 530-7288
Fax: (616) 249-3484

Bill Aman, Fire Inspector
1250 36th St. S.W.
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Email: amanb@wyomingmi.gov
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Fax: (616) 249-3435

Robert Hoekwater, Electrical & Sign Inspector
1155 28th St. S.W.
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Robert Brackett, Electrical & Housing
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Web: www.wyomingmi.gov
Phone: (616) 530-7291
Fax: (616) 249-3484

FAX ALL SPECIAL INSPECTION REPORTS TO (616) 249-3484

SOILS, CONCRETE AND STEEL REPORTS ARE REQUIRED ON

PROJECTS UNLESS OTHERWISE NOTED