

**Application for Plan Examination**  
Michigan Department of Labor & Economic Growth  
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: \$100.00 (non-refundable)**

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Authority: 1972 PA 230  
Completion: Voluntary  
Penalty: Plans will not be reviewed

The Department of Labor and Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

**Note: The applicant is responsible for all fees applicable to this application.**

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
SUBMITTAL				
<input type="checkbox"/> Addendum No. _____ <input type="checkbox"/> Bulletin No. _____    Original Submission No. _____				
BUILDING DATA				
GROSS FLOOR AREA <input type="checkbox"/> New Building _____ <input type="checkbox"/> Addition _____ <input type="checkbox"/> Alteration _____ <input type="checkbox"/> Repair _____				
CLASSIFICATION PER BUILDING CODE Building Use _____    Construction Type _____    No. of Occupants _____    Area/Floor _____    No. of Floors _____				
FIRE SPRINKLERS <input type="checkbox"/> Entire Building <input type="checkbox"/> Limited Area _____ <input type="checkbox"/> None				
<input type="checkbox"/> School or Government Building is Less Than \$15,000.00			Project Scope _____	
PLAN REVIEW REQUEST				
<input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Other _____ <input type="checkbox"/> Barrier Free <input type="checkbox"/> Footing / Foundation <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Energy				
BUILDING OWNER				
NAME (Company or Individual)			CONTACT PERSON	
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
PROJECT ARCHITECT / ENGINEER				
NAME (Company or Individual)			MICHIGAN LICENSE NUMBER	
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
APPLICANT (Note: All correspondence will be sent to this address)				
NAME OF COMPANY		APPLICANT NAME		SOCIAL SECURITY NUMBER* OR FEIN (Required)
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
APPLICANT SIGNATURE (Must be an original signature)		DATE		FAX NUMBER (Include Area Code)

\*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.

**Submittal:** Indicate what is being submitted and provide the submission number. The submission number is critical when linking this submittal with a previous submission for the same project.

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

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

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

**Applicant:** 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.

### Required Submittals for Plan Review

For each facility, submit completed application, \$100.00 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 shopdrawings 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.

Validation Area

#### **U.S. Postal Service**

Michigan Dept. of Labor & Economic Growth  
Bureau of Construction Codes  
Plan Review Division  
P.O. Box 30255  
7150 Harris Drive  
Lansing, MI 48909

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

Michigan Dept. of Labor & Economic Growth  
Bureau of Construction Codes  
Plan Review Division  
2501 Woodlake Circle  
Okemos, MI 48864