

# Applying for a Demolition Permit

CHARTER TOWNSHIP OF CANTON  
DEPARTMENT OF MUNICIPAL SERVICES  
BUILDING & INSPECTION SERVICES  
1150 S. Canton Center Road, Canton, MI 48188 • 734/394-5200

1. The building application must be filled out completely, including the Zoning District. A plot plan drawing must accompany the application showing the structures to demolish, perimeter fencing type and location of the fencing for the demolition process, any bodies of water or sewer drains located on or near the demolition property, and the proposed access road to be used to gain access to the site.
2. The application must be submitted with disconnect notices from Detroit Edison and MichCon, (DTE). The Building Division will forward a copy of the application to the Water Division in Canton. Please see attached demolition specs for additional information on water services.
3. If there is a well or septic on the property, contact the Wayne County Health Department at 734/727-7400 for the proper procedures for abandoning a well or septic. If there is a township water connection to the building, please contact Canton's Water Billing Services at 734/394-5240 to schedule an appointment for a final meter reading, equipment removal and a water shut off at the stop box. Once this is completed, please contact Public Works at 734/397-1011 to schedule the disconnect from the water service. **See attached GDSA for further clarification.** The demolition permit will not be release until the applicant provides written verification from Wayne County that their requirements have been followed for well and septic.
4. Three inspections will be conducted on the demolition site. To arrange these inspections, call the Building Department at 734/394-5200 one day in advance.
  - A plumbing inspection, to make sure the sewer has been properly capped.
  - Two building inspections are required. An open hole inspection and a final inspection to make sure the site has been cleaned and leveled.
5. Please see the attached specification for further requirements.



## Checklist for Renovation/Demolition Operations

### RENOVATION PROJECTS

Your project may be regulated through the federal National Emissions Standards for Hazardous Air Pollutants (NESHAPs) and the following may apply:

- A thorough asbestos inspection may be required to be performed by an accredited asbestos inspector.
- Notification form submittal may be required.
- Asbestos abatement may be required.

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### DEMOLITION PROJECTS

Demolition projects involving commercial buildings and structures are regulated through the federal NESHAPs. Single family homes may be regulated if part of a public or private project. The definition of demolition in the NESHAPs regulations is as follows:

"The wrecking or taking out of any load-supporting structural member of a facility together with any related handling operations or the intentional burning of any facility."

- All commercial demolitions are regulated through the NESHAPs and a 10 working day notification is required.
- An asbestos inspection by an accredited asbestos inspector is required prior to demolition of commercial facilities.
- All regulated asbestos containing material must be removed prior to demolition of a regulated facility.

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### QUESTIONS?

Please contact Tammy Bell, Asbestos Inspector, Michigan Department of Environmental Quality for projects in Wayne County if you would like further information and/or forms.

Ph: 313-456-4686 Fax-313-456-4692

[bellt4@michigan.gov](mailto:bellt4@michigan.gov)

# Building Permit Application

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## Building Services Use Only

License Attached \_\_\_\_\_ Check Number \_\_\_\_\_ Permit No. BD# \_\_\_\_\_  
Street Prot. \_\_\_\_ Att. \_\_\_\_ Need \_\_\_\_ Blkt \_\_\_\_ N/A Total Due\$ \_\_\_\_\_

**Business Name:** \_\_\_\_\_ **\*E-mail Address** \_\_\_\_\_

### I. IDENTIFICATION

- 1. Permit Applicant** \_\_\_\_\_ Phone \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**E-mail Address** \_\_\_\_\_
- 2. Property Owner** \_\_\_\_\_ Phone \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**E-mail Address** \_\_\_\_\_
- 3. Contractor** \_\_\_\_\_ Phone \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**E-mail Address** \_\_\_\_\_
- 4. Architect or Engineer** \_\_\_\_\_ Phone \_\_\_\_\_  
**Mailing Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Zip** \_\_\_\_\_

### II. LOCATION OF IMPROVEMENT

**Address** \_\_\_\_\_ **Canton, MI** **Zip** \_\_\_\_\_  
**Main Cross Streets** \_\_\_\_\_ **And** \_\_\_\_\_  
**Subdivision/Complex** \_\_\_\_\_ **Lot/Bldg** \_\_\_\_\_ **Lot Size** \_\_\_\_\_  
**Business Name** \_\_\_\_\_ **Suite** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Zoning District** \_\_\_\_\_ **Property ID#** \_\_\_\_\_

### III. TYPE AND COST OF IMPROVEMENT

#### A. Type of Improvement (please check)

New Construction  First Occupancy  Reoccupancy  Interior Finish   
Addition/Alteration  Demolition  Repair/Replacement   
Other  \_\_\_\_\_

#### B. Cost

Total Cost of Building Improvements \$ \_\_\_\_\_  
Total Cost of Site Improvements \$ \_\_\_\_\_  
**TOTAL PROJECT COSTS** \$ \_\_\_\_\_



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C. Use (please check)

- |  |  |
|--|--|
| <input type="checkbox"/> Single Family Residence                   | <input type="checkbox"/> Garage/Storage                        |
| <input type="checkbox"/> Two Family Residence                      | <input type="checkbox"/> Commercial No. of Tenant Spaces _____ |
| <input type="checkbox"/> Multi Family Residence No. of Units _____ | <input type="checkbox"/> Industrial No. of Tenant Spaces _____ |
| <input type="checkbox"/> Other _____                               |  |

D. Dimension

Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_ Elevation \_\_\_\_\_  
Total Sq. Ft. \_\_\_\_\_ No. of Stories \_\_\_\_\_ Plan# \_\_\_\_\_

IV. NON-RESIDENTIAL CONSTRUCTION

Occupant Load \_\_\_\_\_ Principal Type of Construction \_\_\_\_\_  
Use Group \_\_\_\_\_ Off Street Parking Spaces \_\_\_\_\_  
DESCRIBE IN DETAIL the proposed use of the structure/building: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

V. REQUIREMENTS

THERE MAY BE DEED RESTRICTIONS ON THIS PROPERTY NOT PERMITTING THIS PROJECT. PLEASE CHECK THE TITLE FOR ITS DEED RESTRICTIONS AND COVENANTS.

The location, ownership and detail must be correct, complete and legible. Separate applications are required for each project. Building plans, specifications, and a detailed plan must be filed with this application.

VI. VALIDATION

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 I agreed to conform to all applicable laws of this jurisdiction.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_

VII. BUILDING SERVICES REVIEW

HOA/ACC Attached  Yes  N/A

Estimated Cost \$ _____	Application Fee _____
Receipt # _____	Registration Fee _____
Master/Tag # _____	Plan Review Fee _____
Permit # _____	Underground Inspection _____
Water/Sewer # _____	Permit Fee _____
	<b>Total Permit Fee</b> _____

Remarks \_\_\_\_\_

APPROVED FOR PERMIT:

Building Inspector Date \_\_\_\_\_ Rob Creamer, Building Official Date \_\_\_\_\_



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Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to person who are to perform work on a residential building or a residential structure. Violators of Sections 23a are subjected to civil fines.

LICENSE NO. \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

FEDERAL EMPLOYER ID NO. OR REASON FOR EXEMPTION \_\_\_\_\_

WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION \_\_\_\_\_

MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION \_\_\_\_\_

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 I agree to conform to all applicable laws of this jurisdiction.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date