

# COMMERCIAL OR INDUSTRIAL PROJECTS PLAN REVIEW APPLICATION

GRAND BLANC TOWNSHIP, BUILDING DEPARTMENT  
5371 S. Saginaw Street  
PO Box 1833  
Grand Blanc, MI 48480

Telephone: (810) 424-2782  
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## APPLICATION INFORMATION AND REQUIREMENTS (application MUST be complete):

- PLAN REVIEW FEES MUST BE PAID IN FULL AT TIME OF PROJECT SUBMITTAL
- PLANS MUST BE SIGNED/SEALED BY ARCHITECT OR ENGINEER
- THREE SETS OF SIGNED/SEALED PLANS ARE REQUIRED
- DIGITAL COPY REQUIRED
- THE FOLLOWING SIGNATURES MUST BE ON THE APPLICATION:
- Applicant       Architect/Engineer       Design Professional In Charge
- SITE PLAN REVIEW IN PROCESS?  COMPLETED AND APPROVED?
- ZBA REQUIRED?       IF YES, APPROVAL OBTAINED?
- SPECIAL LAND USE REQUIRED?       IF YES, APPROVAL OBTAINED?

**IT IS YOUR RESPONSIBILITY** To Obtain The Following County & State Permits (**If Required**) Prior To Application For Your Building Permit:

- Soil Erosion Permit (County)       Right-Of-Way Permit (County)
- CCIF (B) Permit (County)       IPP Permit (County)
- DEQ (State)       DNR (State)

## **Fire Suppression / Fire Prevention Information Required (last page of application)**

**TED SCZEPANSKI, BUILDING OFFICIAL**  
BUILDING PLAN REVIEW/COMMERCIAL BUILDING INSPECTIONS

**MIKE KYLE**  
ELECTRICAL PLAN REVIEW/INSPECTOR

**GLENN THOMAS**  
MECHANICAL PLAN REVIEW/INSPECTOR  
FIRE SUPPRESSION PLAN REVIEW/INSPECTOR  
PLUMBING PLAN REVIEW/INSPECTOR

**Authority:** Act 230, P.A.1972, as amended      **Completion:** Mandatory      **Penalty:** Permit Cannot Be Issued  
**Notice:** Grand Blanc Township will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

**PLEASE NOTE: ONLY those items checked and that have fees paid will be reviewed. \*\*Additional submittals for plan review require a new application:**

Building \_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_ Plumbing \_\_\_\_\_ Energy \_\_\_\_\_

Foundation \_\_\_\_\_ Barrier Free \_\_\_\_\_ Fire Prevention\* \_\_\_\_\_ Fire Suppression \_\_\_\_\_ Fire Alarm \_\_\_\_\_

- \* Each of the following require fire prevention plan review and permits in addition to mechanical and/or electrical:
  - Any project requiring fire suppression plan review and permit.
  - Any project requiring fire alarm systems
  - Any project requiring Automatic Range Hood systems

➤ **APPLICANT INFORMATION:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone (if desired): \_\_\_\_\_ Fax: \_\_\_\_\_

➤ **Applicant Signature:** \_\_\_\_\_ **Title:** \_\_\_\_\_

➤ **ARCHITECT/ENGINEER INFORMATION:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License #: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax \_\_\_\_\_

➤ **DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE:**

Company: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Architect: \_\_\_\_\_ Engineer: \_\_\_\_\_ License Number: \_\_\_\_\_

Email \_\_\_\_\_

➤ **RESPONSIBILITY AREAS:**

Building \_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_ Plumbing \_\_\_\_\_ Energy \_\_\_\_\_

Foundation \_\_\_\_\_ Barrier Free \_\_\_\_\_ Fire Suppression \_\_\_\_\_ Other \_\_\_\_\_

➤ \_\_\_\_\_  
**Signature of Design Professional in Charge** **Date**

**THIS APPLICATION IS FOR:**

Project Address: \_\_\_\_\_

Project Name: \_\_\_\_\_

Building Data: New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Other \_\_\_\_\_

**Proposed Construction Cost:** \_\_\_\_\_

**AREA 1** .....General Description: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ Alteration Area: \_\_\_\_\_ Occupant Load: \_\_\_\_\_

Use Group: \_\_\_\_\_ Construction Type: \_\_\_\_\_ Date: \_\_\_\_\_

**Fire Suppression:** Yes / No **Type of System:** NFPA13 NFPA13R NFPA13D LTD AREA HOOD SYS OTHER

**Fire Alarms:** Yes / No **Type of System:** MANUAL AUTOMATIC

**AREA 2** .....General Description: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ Alteration Area: \_\_\_\_\_ Occupant Load: \_\_\_\_\_

Use Group: \_\_\_\_\_ Construction Type: \_\_\_\_\_ Date: \_\_\_\_\_

**Fire Suppression:** Yes / No **Type of System:** NFPA13 NFPA13R NFPA13D LTD AREA HOOD SYS OTHER

**Fire Alarms:** Yes / No **Type of System:** MANUAL AUTOMATIC

**AREA 3** .....General Description: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ Alteration Area: \_\_\_\_\_ Occupant Load: \_\_\_\_\_

Use Group: \_\_\_\_\_ Construction Type: \_\_\_\_\_ Date: \_\_\_\_\_

**Fire Suppression:** Yes / No **Type of System:** NFPA13 NFPA13R NFPA13D LTD AREA HOOD SYS OTHER

**Fire Alarms:** Yes / No **Type of System:** MANUAL AUTOMATIC

# PLAN REVIEW

## FIRE SUPPRESSION AND FIRE PREVENTION FOR FIRE SUPPRESSION

### Separate Permits Required for Fire Suppression and Fire Prevention for Fire Suppression

**ATTENTION OWNERS / LEASEES:**

**ATTENTION CONTRACTORS:**

This project may need to obtain yearly operational permit and inspection from the Grand Blanc Township Fire Prevention Bureau

When application for a fire suppression permit is made, shop drawings are required.

- Owner/Manager is responsible to pay all fire prevention plan review fees and submit a fire prevention permit application with appropriate fees.

#### PLEASE PROVIDE A DESCRIPTION OF WORK TO BE COMPLETED UNDER THIS PERMIT

SYSTEM TYPE: GRID \_\_\_\_\_ T-System \_\_\_\_\_

Density \_\_\_\_\_ Wet Pipe \_\_\_\_\_

“C” Factor \_\_\_\_\_ Dry Pipe \_\_\_\_\_

Design Area Square Feet \_\_\_\_\_ Pre-Action System \_\_\_\_\_

# Sprinklers Calculated \_\_\_\_\_ Wet Pipe w/Antifreeze \_\_\_\_\_

Hose Allowance \_\_\_\_\_

Water Supply Static Flow Test \_\_\_\_\_ Residual \_\_\_\_\_ at \_\_\_\_\_ G.P.M.

System Demand \_\_\_\_\_ G.P.M. @ \_\_\_\_\_ PSI at \_\_\_\_\_

System G.P.M. \_\_\_\_\_ Hose G.P.M. \_\_\_\_\_ Pressure \_\_\_\_\_

Hazard Type \_\_\_\_\_

K for Heads \_\_\_\_\_ Design Density \_\_\_\_\_

# Head on Each Line \_\_\_\_\_

# Rows/Lines: \_\_\_\_\_ Spacing of Rows \_\_\_\_\_

Total # of Heads \_\_\_\_\_