



**CITY of BELDING**  
live. grow. naturally.

# INFRASTRUCTURE PERMIT APPLICATION



**(7 to 10 Working Days Required for Issuance of Permit)**

**(Only Emergency Permits Issued on Demand)**

**PERMIT MUST BE POSTED**

**Type of Improvement** (Deposit required for replacement of street or sidewalk, as appropriate) **Permit #** **Date**

- |   |  |                                     |   |                                       |
|---|--|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Drive Approach | <input type="checkbox"/> Curb Cut        | <input type="checkbox"/> Sidewalk   | <input type="checkbox"/> Street Opening | <input type="checkbox"/> Boring       |
| Permit Fee = \$20.00                    | Permit Fee = \$20.00                     | Permit Fee = \$20.00                | Permit Fee = \$20.00                    | Permit Fee = \$0                      |
| Deposit = \$125.00                      | Deposit = \$125.00                       | Deposit = \$125.00                  | Deposit = \$125.00                      | Deposit = \$0                         |
| Total = \$145__                         | Total = \$145__                          | Total = \$145__                     | Total = \$145__                         |                                       |
| <input type="checkbox"/> Single-Family  | <input type="checkbox"/> Multiple-Family | <input type="checkbox"/> Commercial | <input type="checkbox"/> Industrial     | <input type="checkbox"/> Right-of-Way |

**Applicant Name:** \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Applicant is the:  Owner  Lessee  Contractor/Architect

Property Owner / Contact Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**Project Location or Address:** \_\_\_\_\_

**Permanent Parcel Number:** \_\_\_\_\_

- **Call Miss Dig at 1-800-482-7171 three days prior to digging.** A minimum of 2 working days is required before actual work begins.
- Inspection is required by the DPW Director or other designated personnel before digging and before backfilling. In order to avoid a core sample drilled at your expense, **remember to call 616-260-2319 for all inspections two (2) days prior to pouring.**
- Before any trenching is done, the DPW Director must be contacted at 616-260-2319, between the hours of 8:00 am and 4:00 pm, Monday through Friday.
- The contractor or property owner is responsible to replace all curb, sidewalk or street to the City's specifications, along with properly barricading any obstruction that could cause personal injury due to trip hazards. All concrete and blacktop shall be hauled away by the contractor or property owner. An invoice will be issued if the actual cost of the project is more than the deposit.
- **All streets, sidewalks, drive approaches and curb cuts must be replaced within 30 days of removal.** Open curb cuts to roads, curbs and sidewalk must be maintained by the homeowner or contractor.

The undersigned further agrees that if this application is approved, they will meet all legal requirements and they will be responsible to the City of Belding for any damages to the street or street structures or to the structures of any private company within the right-of-way of the streets, and that they shall well and truly pay all damages, fines, and penalties which they shall become liable to pay and shall save the City of Belding harmless from all suits, claims, damages and proceedings of any kind due to their operations within the streets.

**Sign and Print Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>TO BE COMPLETED BY CITY</b>	Total Fee: \$ _____	Receipt #: _____
--------------------------------	---------------------	------------------

**DPW Director Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Zoning Administrator** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Admin. Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TO BE FILLED OUT BY PROPERTY OWNER OR CONTRACTOR  
THE PLOT PLAN MUST BE COMPLETED, PAGE 3**

**Date:** \_\_\_\_\_ **Job Address:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Applicant Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_

**Contractor Address:** \_\_\_\_\_

**Type of Work to be Performed:** \_\_\_\_\_

<u>Drive Approach</u>	<u>Curb Cut</u>	<u>Sidewalk</u>	<u>Street Opening</u>
Form Inspection: _____	Form Inspection: _____	Form Inspection: _____	Form Inspection: _____
By: _____	By: _____	By: _____	By: _____
Final Inspection: _____	Final Inspection: _____	Final Inspection: _____	Final Inspection: _____
By: _____	By: _____	By: _____	By: _____

**Right of Way (No charge for this permit)**

**Boring (No charge for this permit)**

Yard Restoration Final Inspection: \_\_\_\_\_

By: \_\_\_\_\_

The Applicant has been granted a sidewalk exemption by the Planning Commission on \_\_\_\_\_ and is entitled to a full refund of their deposit of \$ \_\_\_\_\_

The Applicant has replaced the necessary items to the City's specification and is entitled to a refund of their deposit in the amount of \$ \_\_\_\_\_

101-000-288-000 \$ \_\_\_\_\_  
(Deposit Account)

101-000-462-000 \$ \_\_\_\_\_  
(If permit was not needed)

\_\_\_\_\_  
Signature of DPW Authorized Representative

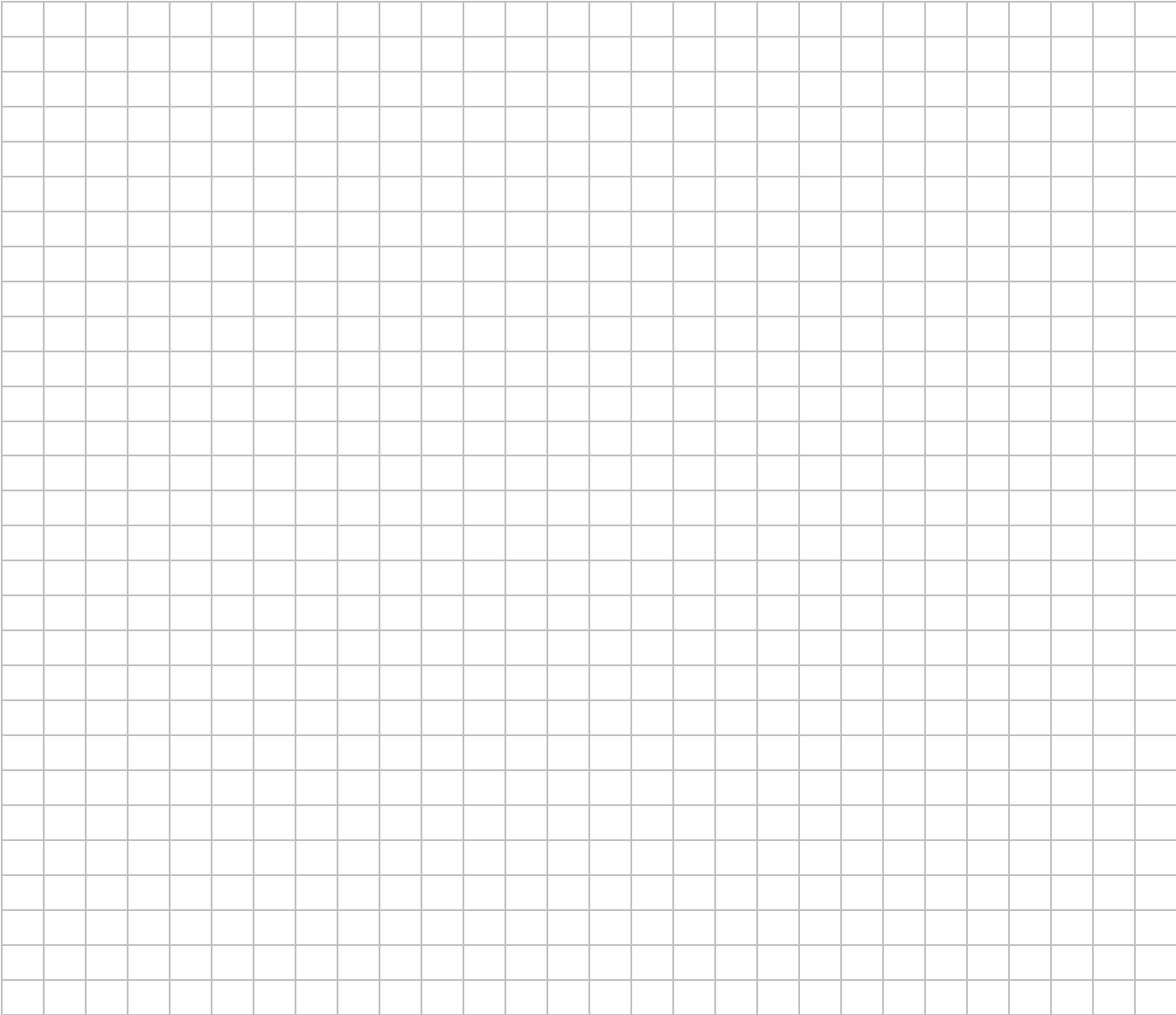
\_\_\_\_\_  
Date

Check box if brochure was given to applicant. \_\_\_\_\_ ( City Staff Signature )

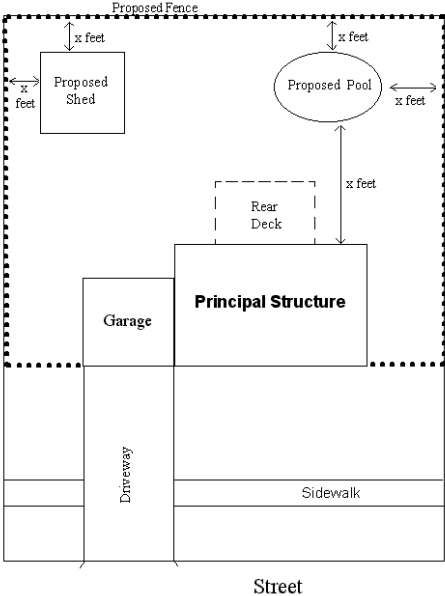
Applicant received brochure. \_\_\_\_\_ ( Signature of who received brochure )

### Plot Plan

(Remember to show streets, all structures, easements, fences, gates, pavements, electrical lines & property lines)



Sample of Plot Plan:



**INFRASTRUCTURE PERMIT CHARGES**  
**(TO BE FILLED OUT BY CITY)**  
 (New Construction Only)

		Fee Amount	Quantity	Total Permit Cost
<input type="checkbox"/> Drive Approach	(G0288)	\$145 each	_____	_____
<input type="checkbox"/> Street Opening	(G0288)	\$145 each	_____	_____
<input type="checkbox"/> Curb Cut	(G0288)	\$145 each	_____	_____
<input type="checkbox"/> Sidewalk	(G0288)	\$145 each	_____	_____
<input type="checkbox"/> Water Tap	(WA611)	\$700	_____	_____
<input type="checkbox"/> Sewer Tap	(SW610)	\$700	_____	_____
<input type="checkbox"/> Storm Sewer Tap		\$0	_____	_____
<input type="checkbox"/> Water Turn On	(WA470)	\$15 each	_____	_____
<input type="checkbox"/> Outside Plumbing Permit	(G0289)	\$40 each	<b>Must fill out the attached Plumbing Permit</b>	_____
<input type="checkbox"/> Right of Way Permit		No Charge		_____
<input type="checkbox"/> Boring Permit		No Charge		_____
_____	DPW Director		_____	Date
_____	Marci Cooper, Zoning Administrator		_____	Date

Notes: