

CITY OF BRIGHTON APPLICATION FOR BUILDING, DEMOLITION & SIGN PERMIT
200 N. First Street – Brighton, MI 48116 – commdev@brighton.org – Phone: 810-225-8019

PROJECT LOCATION

Project Address: _____

Parcel ID # 4718 - _____

APPLICANT

Name: _____ Phone: _____

Address: _____

Email: _____

I hereby certify the proposed work is authorized by the owner of record and that I have authorized by the owner to make this application as his authorized agent and we agree to conform to applicable laws of this jurisdiction. All information on this application is accurate to the best of my knowledge.

Date

Signature

PROPERTY OWNER

Name: _____ Phone: _____

Address: _____

Email: _____

CONTRACTOR

Name: _____ Phone: _____

Address: _____

Email: _____

Federal Employer ID # _____

ARCHITECT

Name: _____ Phone: _____

Address: _____

Email: _____

TYPE OF IMPROVEMENT

RESIDENTIAL

Estimated Project Cost _____

Addition	_____	Demolition	_____	Driveway	_____
New Home	_____	Windows	_____	Pool	_____
Deck	_____	Remodel	_____	Accessory Structure	_____
Foundation	_____	Repair	_____	Attached Garage	_____
Roof	_____	Fence	_____	Patio	_____
Siding	_____	Porch	_____	Finish Basement	_____
Other	_____				

COMMERCIAL

Estimated Project Cost _____

New Building	_____	Remodel	_____	Demolition	_____
Addition	_____	Tenant Space	_____		
Igloo	_____	Other	_____		

SIGNS

Estimated Project Cost _____

Pole	_____	Projecting	_____
Ground	_____	Canopy	_____
Wall	_____		

Height of Sign(s) _____

Total Area of Sign(s) _____

Number of Faces _____

Square Feet Per Face _____

Does sign require electrical wiring or components? _____

Zoning District _____



WATER METER PURCHASE/INSTALLATION AND/OR TAP INSPECTION

Date: _____ Permit Number: _____

Property Address: _____
Street City State Zip

Owner/Developer's Name: _____ Contact Phone: _____

Contact Email: _____ Contact Fax: _____

Owner/Developer's Address: _____
Street City State Zip

Meter Type: New _____ Existing (replacement) _____ Building _____ Irrigation _____

Meter Size:	FY 20/21 Fee	Flanges:	
3/4"	\$ 468.00	\$ _____	N/A \$ _____
1"	\$ 567.90	\$ _____	N/A \$ _____
1-1/2"	\$ 1,305.00	\$ _____	\$75 \$ _____
2"	\$ 1,525.00	\$ _____	\$80 \$ _____
3"	\$ 1,850.00	\$ _____	\$405 \$ _____
4"	\$ 3,440.00	\$ _____	\$545 \$ _____
	Total Paid	\$ _____	Total Paid \$ _____

TOTAL PAID (Meter & Flanges) \$ _____

Type of payment: Cash _____
Check _____ Check # _____

Tap Inspection Fee \$ 100.00 \$ _____
(Per Tap) Total Paid \$ _____

Type of payment: Cash _____
Check _____ Check # _____

Acknowledgement Section

A plumbing permit from Livingston County Building Department is required. Their phone number is 517-546-3240.

You, the applicant, must contact Patty Thomas, Asst to the DPS Director, at 810-225-8309 to schedule the pick up of your meter and associated hardware

Tap Inspection fees must be paid at City Hall before the inspection will be scheduled.

Printed Name: _____ Date: _____

Applicant's Signature: _____