



**Livingston County Department of Public Health**

**Environmental Health Division**

2300 E. Grand River, Suite 102, Howell, MI 48843-7578

(517) 546-9858

FAX: (517) 546-9853

**REVIEW PERMIT #** \_\_\_\_\_

**REVIEW OF PROPOSED ALTERATION OR ADDITION OF EXISTING DWELLINGS**

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Property Address/Location \_\_\_\_\_ Township \_\_\_\_\_ TAX CODE ID \_\_\_\_\_

Directions to Property \_\_\_\_\_

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Owner's Name \_\_\_\_\_ Builder's Name \_\_\_\_\_

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Mailing Address \_\_\_\_\_ Builder's Mailing Address \_\_\_\_\_

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Mailing City, State, Zip \_\_\_\_\_ Builder's City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Builder's Phone Number \_\_\_\_\_

**Description of proposed addition, alteration, construction, demolition, relocation, or removal of structure:** (Please be as specific as possible, including dimensions, type of living space or structure, alteration of pitch or elevation of roof line, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

All project proposals must include a **COMPLETE AND ACCURATELY DIMENSIONED SITE PLAN**, including existing and proposed structures, locations of roads, steep slopes, surface water, wetlands, wells & septic systems, including those on neighboring properties within 50'.

For *decks, gazebos, swimming pools, sheds and garages or storage buildings without living space or plumbing*, submittal of dimensioned project sketches is also required.

For *additions to or alteration of living space*, submittal of complete and accurately dimensioned **existing** and **proposed** floor plans and elevations is also required.

The undersigned, being duly authorized, certifies the statements, depictions, and dimensions herein contained and attached are true and correct and further acknowledges that he/she is the property owner or is acting as an authorized representative on behalf of the property owner. Any deviation from submitted project plans or description will void Health Department approval. *Submittal of incomplete or inaccurate information may result in non-approval without further review.*

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Process Fee: Amount \$ \_\_\_\_\_ Receipt # \_\_\_\_\_

Site Visit: Yes No Amount \$ \_\_\_\_\_ Receipt # \_\_\_\_\_



## REVIEW OF PROPOSED ALTERATION OR ADDITION TO EXISTING DWELLING

Prior to issuance of the LCDPH Waiver the following check list must be completed.

**Section A** must be completed by **All Applicants**. Please determine among the remaining Sections (B through E) what is applicable to your addition request and answer the questions appropriately.

**Please note that more than one section may apply to your specific project.** If you have any questions, please do not hesitate to contact the LCDPH at (517) 546-9858.

### Section A ALL PROJECTS MUST ANSWER

Yes No

1. \_\_\_ \_\_\_ Address is served by a community water system (city or municipal water). If yes skip numbers 4, 5, and 6.
2. \_\_\_ \_\_\_ Address is served by municipal sewers or by a community septic system. If yes, skip numbers 3 & 7.
3. \_\_\_ \_\_\_ Septic tank(s) and/or sewage pump chamber will be accessible for pumping & maintenance after project completion.
4. \_\_\_ \_\_\_ Well head will be directly accessible by well rig (a large truck) after project completion.
5. \_\_\_ \_\_\_ Well is 4" or 5" in diameter, and projects at least 12" above grade.
6. \_\_\_ \_\_\_ Well is at least 50' from all septic tanks, sewage pump & grinder chambers, & septic fields (including neighboring).
7. \_\_\_ \_\_\_ Septic tank and field or sewage pump chamber are at least 50' from all wells (including neighboring)
8. \_\_\_ \_\_\_ Only one well exists (and/or all unused wells have been properly abandoned by a licensed Michigan Well Drill).

### Section B Demolition or Removal of Existing Structures:

1. \_\_\_ \_\_\_ Replacement or reconstruction of removed or demolished structure is being proposed.
2. \_\_\_ \_\_\_ Owner proposing to rebuild structure.

### Section C Additions or alterations to existing structures:

1. \_\_\_ \_\_\_ Additional second story living space proposed.
2. \_\_\_ \_\_\_ Proposed project will increase value of structure by 50% or more.
3. \_\_\_ \_\_\_ Number of bedrooms will be increased (if applicable) From: \_\_\_\_\_ To: \_\_\_\_\_
4. \_\_\_ \_\_\_ Additional or reconfigured office, den, loft, or other living or working space proposed
5. \_\_\_ \_\_\_ Structure "footprint" will be increased or changed from what is existing.
6. \_\_\_ \_\_\_ Roof will be raised or roof pitch increased or changed from the original.
7. \_\_\_ \_\_\_ Existing square footage \_\_\_\_\_. Proposed square footage \_\_\_\_\_.

### Section D Garages, Pole Buildings, Greenhouses, Outbuildings, etc.

1. \_\_\_ \_\_\_ Proposed building will be within 50' of any septic tank, septic field, or drywell: Approx. Distance: \_\_\_\_\_
2. \_\_\_ \_\_\_ Proposed building will be within 50' of any well: \_\_\_\_\_ Approx. Distance: \_\_\_\_\_
3. \_\_\_ \_\_\_ Plumbing fixtures will be installed: Type & number: \_\_\_\_\_
4. \_\_\_ \_\_\_ Future bathrooms, hand sinks, showers, etc. are planned.

### Section E Swimming Pools, Decks, Gazebos, etc:

1. \_\_\_ \_\_\_ Proposed structure will be within 50' of any septic tank, septic field, or drywell: Approx. Distance: \_\_\_\_\_
2. \_\_\_ \_\_\_ Proposed structure will be within 50' of any well: \_\_\_\_\_ Approx. Distance: \_\_\_\_\_