

BASEMENT or CRAWL SPACE ONLY (Conventional Foundation)

Construction Address: _____

Date: _____



Department of Building Safety

306 S North St, MI 49349 Phone 231-689-7216 or 231-224-3960 Fax 888-825-7654
Office Hours: Newaygo County Building Department, 8:00am – Noon & 1:00pm – 4:00pm
Newaygo City Hall, 28 N State Road, M-W., 1:00pm - 3:00pm (call to verify)

All sections must be answered completely. Check the appropriate box or fill in blank as required.

DESCRIPTION (Check One) **Modular Home** **Moved Structure** **Other** _____

Note: For a modular home you must submit a construction package (supplied by the dealer) detailing the proper structural supports and locations, marriage wall and beam connections, etc. for this structure.

BUILDING SIZE & SET-BACKS

Size (for other than sq. bldg. use addl.): _____ x _____ x _____ x _____ x _____

Set-backs to property lines or street right-of-way: Front _____ ft. Side _____ ft. Side _____ ft. Rear _____ ft.

No. of Stories: _____ Comments: _____

SOIL & SITE CONDITIONS

Type: Sand Clay Other _____ **Foundation Drains:** Yes No

Footing depth (below grade): 24" 36" 42" 48" 72" Other _____ "

Foundation height (above grade): 8" 10" 12" Other _____ "

FOUNDATION

Type: Concrete Pole All-weather wood Other _____

• Concrete check all that apply. (For Pole or All-Weather Wood Foundation you must obtain and submit separate forms for these foundations.)

Monolithic Slab and/or **Basement Floor**

Width at base (monolithic slab): 12" 14" 16" Other _____ "

Thickness of floor: 3 1/2" 4" Other _____ "

Insulation Thickness: _____ " **R-Value** _____ **Depth below floor:** _____ " (48" minimum)

Conventional Foundation

Footing

Thick: 8" 10" 12" _____ "

Width: 16" 20" 24" _____ " **Rebar - Number:** _____ **Size:** # _____

Foundation Wall

Type: Poured concrete Concrete block Concrete block, reinf w/ #4 bar and grout @ a min. 24" o.c.

Thickness of wall: 6" 8" 10" 12" Other: _____ " **Rebar - Size:** # _____ - _____ o.c.

Maximum Depth of Unbalanced Fill (in feet): 3' 4' 5' 6' 7' 8' _____'

Dampproofed (basements must be at a minimum): Yes No Material _____

Waterproofed (basements with habitable space): Yes No Material _____

Insulation on Basement &/or Crawl Space Wall (check all that apply)

Draped batts or blankets- Thickness: _____ " R-Value _____

&/or Foam- Thickness _____ " R-Value _____

&/or 2 x 4" stud walls Insulation Width _____ " Insulation Thickness _____ " R-Value _____

&/or 2 x 6" stud walls Insulation Width _____ " Insulation Thickness _____ " R-Value _____

&/or Other _____ Insulation Thickness _____ " R-Value _____

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FOUNDATION - continued

Sill Plate Size: 2 x 6 2 x 8 2 x _____ Sill Sealer: Yes No Type: _____

Press. Treated: Yes No Species: SYP Pond. Pine Cedar Other _____

Girder (center beam) Connection: Lags GRK Fasteners Other _____

Spacing: 16" 24" 32" Other _____

Columns/Piers: _____ on _____ foot centers
number of columns

Column/Pier Type: Concrete block One piece steel column 6 x 6 wolmanized post Other _____

Other Footing Type (e.g. fireplace, chimney): _____

Size: _____ x _____ Thickness: _____ " Depth below grade: _____ "

WINDOWS & DOORS

Basements must have at least one egress window. If there are sleeping areas, each area must have an egress window.

Brand: _____ High Performance/Low E: Yes No

Location	Manufacturer's Unit No.	Casement, Slider or Doublehung Type	No. Units	Width by Height Rough Opening	Double or Single Glazing	LamBeam or 2 x material Header Size	R-Value	Manufacturer's U-Value
e.g. Bedroom	3046	doublehung	1	3' 2" x 4' 9"	double	(2) 2 x 10	3.6	.31
_____	_____	_____	_____	x	_____	x	_____	_____
_____	_____	_____	_____	x	_____	x	_____	_____
_____	_____	_____	_____	x	_____	x	_____	_____

SMOKE DETECTORS

Smoke detector type: Electric w/ battery back-up Battery

Location: Immediate vicinity of bedroom Each floor and interconnected (including basement)

NOTES:

- Floor plans are required to be submitted with this form.
- If there is any deviation from this materials list, the Department of Building Safety must be notified for approval.

Signature

Date