

P2 - BUILDING PERMIT APPLICATION

Date: _____

PROPERTY INFORMATION

Address: 4825 Sturtevant Floor: _____ Suite#: _____ Stories: _____

AKA: _____ Lot(s): _____ Subdivision: _____

Parcel ID#(s): _____ Total Acres: _____ Lot Width: _____ Lot Depth: _____

Current Legal Use of Property: _____ Proposed Use: _____

Are there any existing buildings or structures on this parcel? Yes No

PROJECT INFORMATION

Permit Type: New Alteration Addition Demolition Correct Violations

Foundation Only Change of Use Temporary Use Other: _____

Revision to Original Permit #: _____ (Original permit has been issued and is active)

Description of Work (Describe in detail proposed work and use of property, attach work list)

SEE Attachment Order

MBC use change No MBC use change

Included Improvements (Check all applicable; these trade areas require separate permit applications)

HVAC/Mechanical Electrical Plumbing Fire Sprinkler System Fire Alarm

Structure Type

New Building Existing Structure Tenant Space Garage/Accessory Building

Other: _____ Size of Structure to be Demolished (LxWxH) _____ cubic ft.

Construction involves changes to the floor plan? Yes No

(e.g. interior demolition or construction to new walls)

Use Group: _____ Type of Construction (per current MI Bldg Code Table 601) _____

Estimated Cost of Construction \$ 34,260.00 By Contractor \$ _____ By Department

Structure Use

Residential-Number of Units: 1 Office-Gross Floor Area _____ Industrial-Gross Floor Area _____

Commercial-Gross Floor Area: _____ Institutional-Gross Floor Area _____ Other-Gross Floor Area _____

Proposed No. of Employees: _____ List materials to be stored in the building: _____

PLOT PLAN SHALL BE submitted on separate sheets and shall show all easements and measurements (must be correct and in detail). SHOW ALL streets abutting lot, indicate front of lot, show all buildings, existing and proposed distances to lot lines. (Building Permit Application Continues on Next Page)

For Building Department Use Only

Intake By: _____ Date: _____ Fees Due: _____ DngBld? No

Permit Description: _____

Permit #: _____ Current Legal Land Use: _____ Proposed Use: _____

Permit#: _____ Date Permit Issued: _____ Permit Cost: \$ _____

Zoning District: _____ Zoning Grant(s): _____

Lots Combined? Yes No (attach zoning clearance)

Revised Cost (revised permit applications only) Old \$ _____ New \$ _____

Structural: _____ Date: _____ Notes: _____

Zoning: _____ Date: _____ Notes: _____

Other: _____ Date: _____ Notes: _____

Bld 2021-05823



IDENTIFICATION (All Fields Required)

Property Owner/Homeowner

Property Owner/Homeowner is Permit Applicant

Name: Roy Wright Company Name: _____

Address: 4825 Sturtevant City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____

Driver's License #: _____ Email: _____

Contractor

Contractor is Permit Applicant

Representative Name: Josef Osiewski Company Name: Josef Contractors Inc

Address: 17245 Mt. Elliott City: Detroit State: MI Zip: 48228

Phone: 986-604-9210 Mobile: 986 Email: Josef@detcoia.com

City of Detroit License #: 2014-LL-00399

TENANT OR BUSINESS OCCUPANT

Tenant is Permit Applicant

Name: _____ Phone: _____ Email: _____

ARCHITECT/ENGINEER/CONSULTANT

Architect/Engineer/Consultant is Permit Applicant

Name: _____ State Registration#: _____ Expiration Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Mobile: _____ Email: _____

HOMEOWNER AFFIDAVIT (Only required for residential permits obtained by homeowner.)

I hereby certify that I am the legal owner and occupant of the subject property and the work described on this permit application shall be completed by me. I am familiar with the applicable codes and requirements of the City of Detroit and take full responsibility for all code compliance, fees and inspections related to the installation/work herein described. I shall neither hire nor sub-contract to any other person, firm or corporation any portion of the work covered by this building permit.

Print Name: _____ Signature: _____ Date: _____
(Homeowner)

Subscribed and sworn to before me this _____ day of _____ 20 _____ A.D. _____ County, Michigan

Signature: _____ My Commission Expires: _____
(Notary Public)

PERMIT APPLICANT SIGNATURE

I hereby certify that the information on this application is true and correct. I have reviewed all deed restrictions that may apply to this construction and am aware of my responsibility thereunder. I certify that the proposed work is authorized by the owner of the record and I have been authorized to make this application as the property owner(s) authorized agent. Further I agree to conform to all applicable laws and ordinances of jurisdiction. I am aware that a permit will expire when no inspections are requested and conducted within 180 days of the date of issuance or the date of the previous inspection and that expired permits cannot be

Print Name: Josef Osiewski Signature: Josef Osiewski Date: 9-28-2021
(Permit Applicant)

Driver's License #: 0422440005020 Expiration: 01-06-2022

Subscribed and sworn to before me this _____ day of _____ 20 _____ A.D. _____ County, Michigan

Signature: _____ My Commission Expires: _____
(Notary Public)

Section 23a of the state construction code act of 1972, 1972PA230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Visitors of Section 23a are subject to civil fines.

This application can also be completed online. Visit detroitmi.gov/bseed/elaps for more information.



2021-09-28 10:56 AM

City of Detroit Planning & Development Department

Housing Service Division

2 Woodward Avenue, Suite 908 Detroit MI 48226

Property Owner's Styles & Color Selections

Case No.: BCI-0265 Program Name: 0%IHLRP
Property Owner: Roy Wright Rehab. Specialist: Lamaten Jenkins
Property Address: 4825 Sturtevant Contract: Jozef Contractor Inc
City, State Zip: DETROIT, MI 48208

Roofing Style & Color: Charcoal GAF Timberline

Gutters & Downspouts Color: same existing colors

Exterior Paint Color: same existing color

Exterior Trim Paint Color: same existing color

Siding Style & Color: _____

Window Trim Color: same existing colors

Exterior Front Door Style & Color: same existing color

Exterior Grade/Rear Doors Style & Color: _____

Cabinet Door Style & Color: _____

Cabinet Drawer Front Style: _____

Countertop Pattern & Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

_____ Room Paint Color: _____

Flooring Pattern & Color: _____

Carpet Pattern & Color: _____

Roy Wright 9-26-2021
Property Owner's Signature & Date

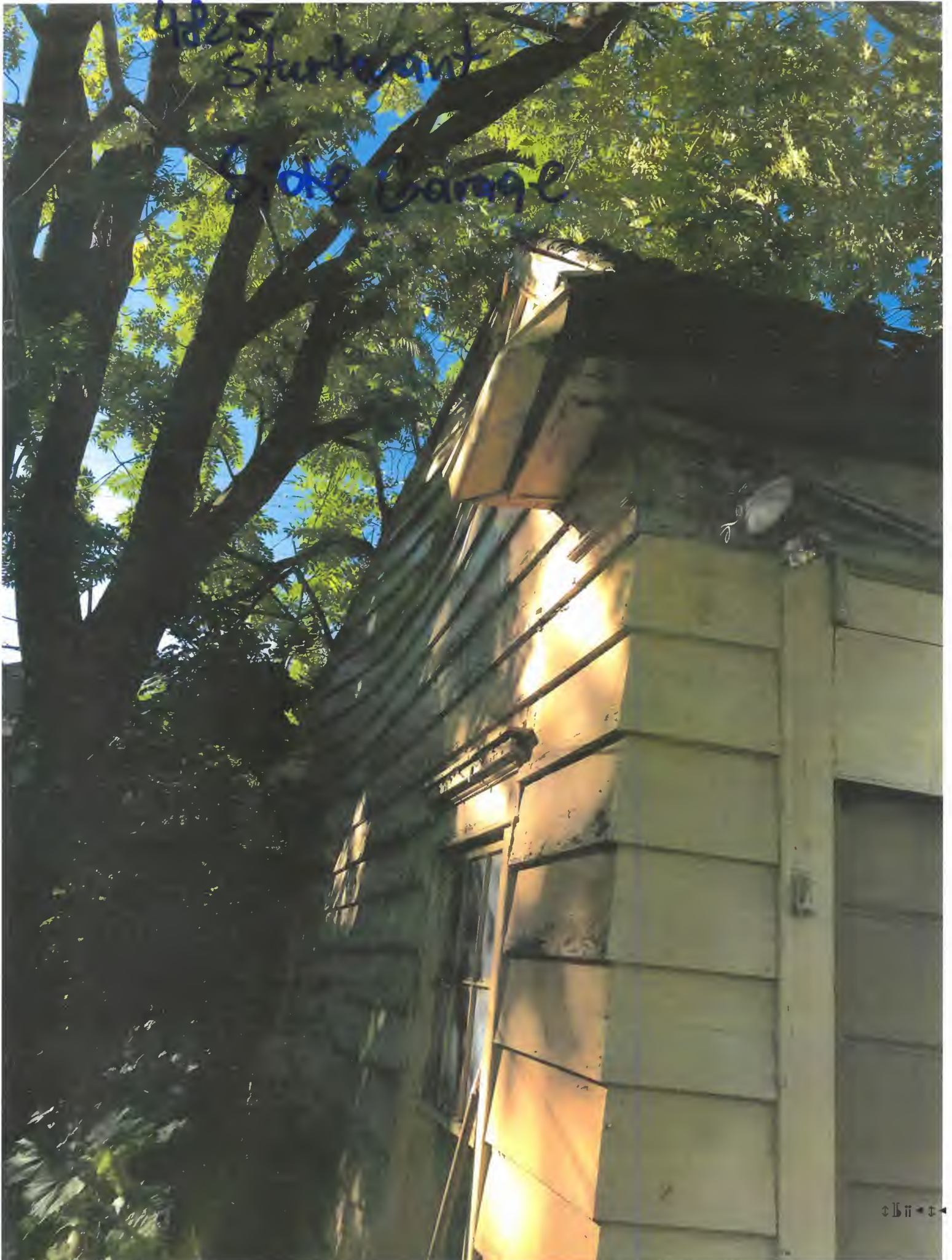
4825

Sturtevant

Siole Garage



1155
Starkway
Old Garage



4825 Skunk Creek

Front Garage



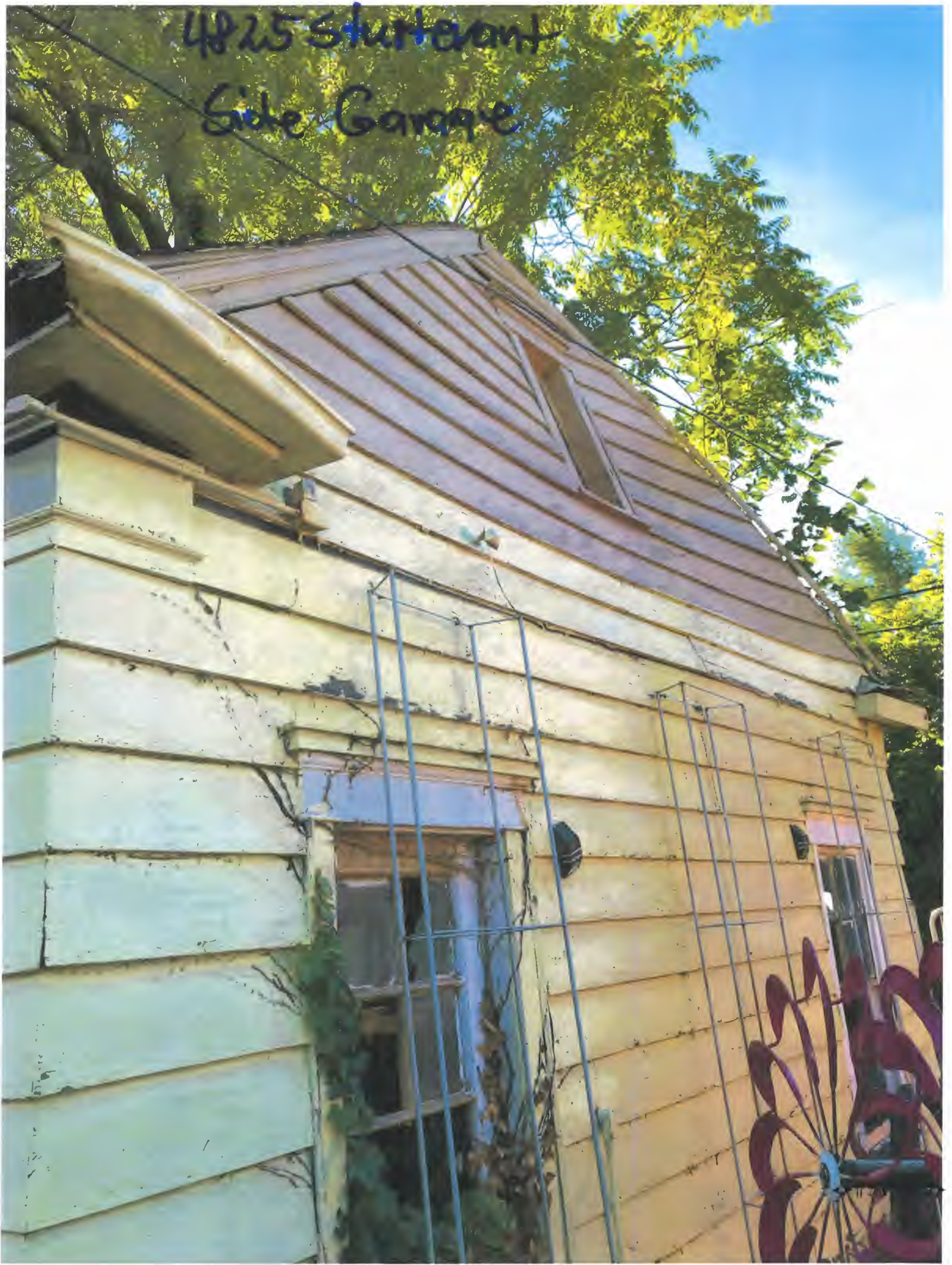
4825 Stanton

Garage

Bac



4825 Starbuck
Side Garage



4825 Sturtevant
BAC HOME



4825
Sturtevant
Bel Fours

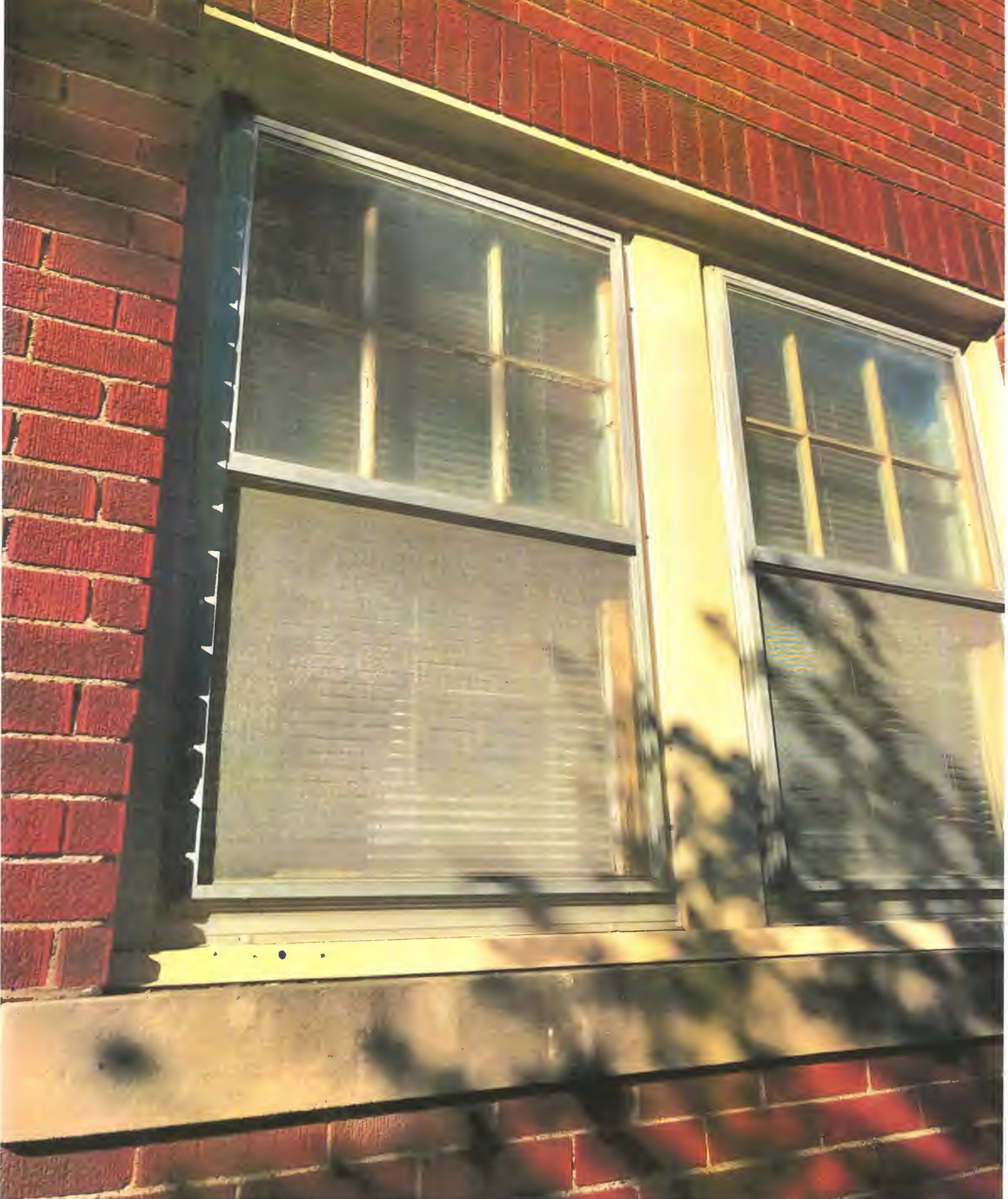


4825 Sturtevant

Side Windows



4825 Sturtevant
Side Windows



4825
Sturtevant
Front

4825



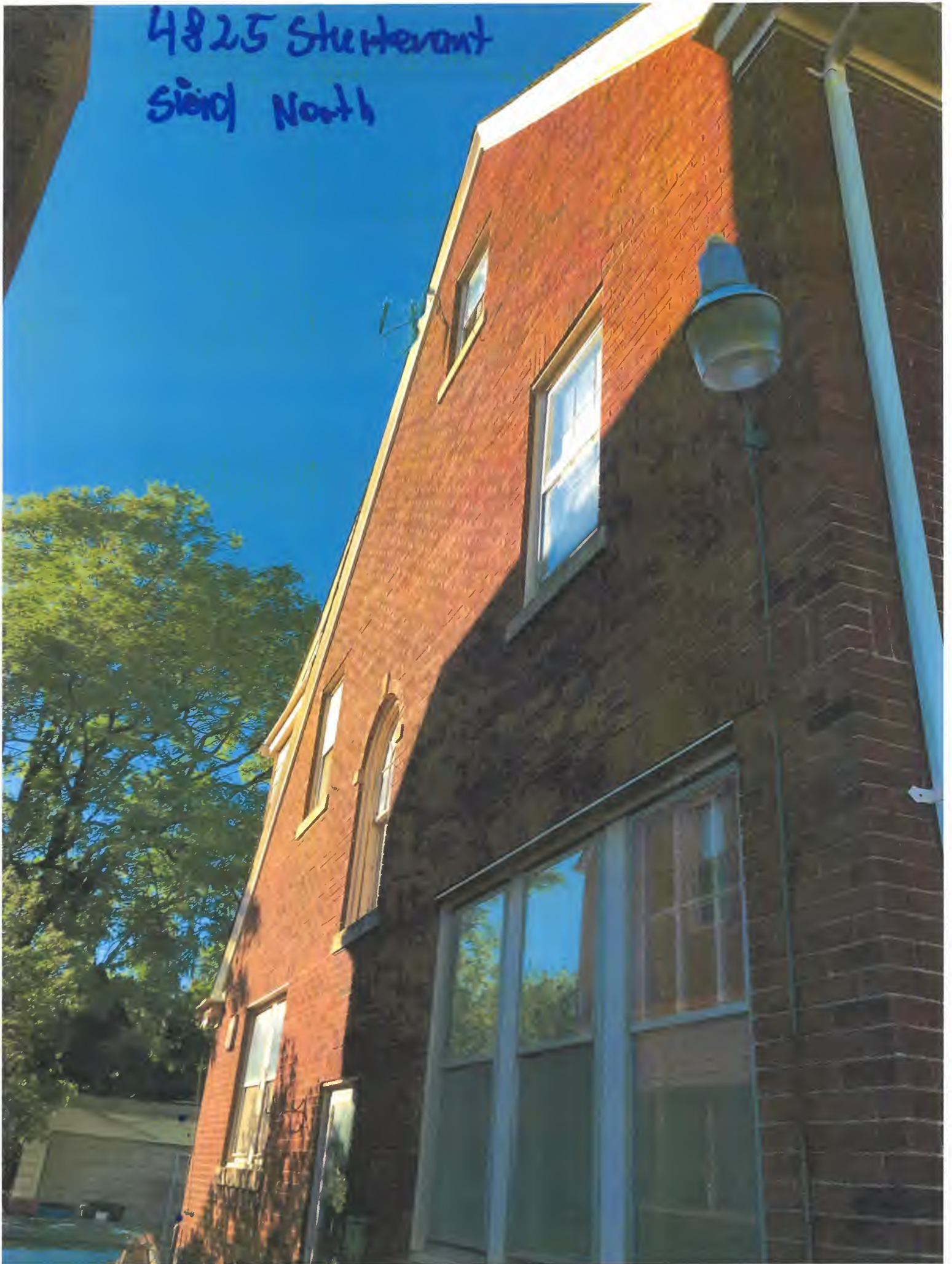
4825 Sturtevant
Gate Windows



4825 Sturtevant
Side west



4825 Sturtevant
Side North



425 Sturtevant

Front
Windows



4825 Sturtevant

Front





DEPARTMENT OF Appeals & Hearings

APPLICATION FOR DAH BLIGHT CLEARANCE

PLEASE PRINT & COMPLETE IN FULL

Please send my clearance by: FAX MAIL EMAIL or I'll PICK-UP in Office

I am an Applicant for a Buildings Safety Engineering & Environmental (BSEED): (Pick One) → permit certificate variance
COMPLETE ONE APPLICATION FOR EACH ADDRESS other _____

FOR: Property Address: 4825 Sturtevant Property Owner's Name: Roy Wright

Applicant's Name: Josef Olaszewski Applicant is: Property Owner Contractor Other: _____
(Person's name not Company name) First Last

Applicant's Address: 17245 W. Elliott Phone: 986-604-5210 Email: Josef.oltas@epura
Street Address, City & State & Zip (area code) xxx-xxxx

Applicant's Company Name & Address: Josef Contractor Inc 17245 W. Elliott, MI 48212 Dkt

List ALL Property Addresses in the city of Detroit that are owned/have been owned by: APPLICANT, PROPERTY OWNER and related entities (use a separate sheet if needed), IF GRANTED THE CLEARANCE WILL ONLY BE FOR THE ADDRESS ABOVE:

I certify that the information above is true to the best of my knowledge and understand that providing false information may deem me, my company AND the owner of the property ineligible for BSEED permit, certificate or variance.

Applicant Signature: Josef Olaszewski Date: 9-28-2021

Return this form to DAH via: Email: dah_cs@detroitmi.gov Mail/In-Person: Department of Appeals & Hearings
Fax: 313 224-7923 2 Woodward Ave., Suite 1004, Detroit, MI 48226

DO NOT WRITE IN THIS SECTION - DAH STAFF ONLY

GRANTED Date/Time: 9/28/21 @ 9:11 a.m.
By: N. Deane

DENIED Reviewed by: _____ Date/Time: _____