



CITY OF SAULT STE. MARIE, MICHIGAN
 ENGINEERING DEPARTMENT
 225 E. Portage Avenue
 Sault Ste. Marie, MI 49783
 PHONE (906) 632-5730 FAX (906) 635-6975

**REQUEST FOR APPROVAL
 ON-SITE PRIVATE UTILITIES**
(Submit with Building Permit Application)

REQUIRED FOR BUILDING PERMIT: For building sites currently without City water and/or sanitary sewer availability.

NOTE: Chippewa County Health Department (CCHD) permits are necessary prior to applying for this request.

APPLICANT(s): (Must be Owner(s) of subject property - PLEASE PRINT)

NAME _____

ADDRESS _____

TELEPHONE _____

_____ Owner's Signature _____ Owner's Signature

Property Description: _____

051- _____

Subject Property Parcel Code Address of Building Site (If Assigned) Date of Signature(s)

SPECIFIC ON-SITE UTILITIES NECESSARY FOR BUILDING CONSTRUCTION:

Private Sewage Disposal System CCHD Permit No. _____

Private Water Supply Well CCHD Permit No. _____

(ATTACH COPY OF APPLICABLE CCHD PERMIT)

I (we) hereby request permission to be allowed the issuance of a Building Permit at the above described location where City water and/or sanitary sewer utilities are currently not available.

I (we) understand that in accordance with a Resolution as adopted by the City Commission on August 15, 1977, it is permissible for a property owner to construct a structure at a location where City utilities (water and/or sanitary sewer) are not available, subject to approval of on-site private utilities by the Chippewa County Health Department.

Further, I (we) understand that a stipulation of the said Resolution is that in the event that city facilities are installed in the subject area in the future, I (we) will be assessed a proportionate share of the cost of such public improvement. I (we) will also be required to connect to the public system at such time as the facilities become available to the property listed under this request. All connections to the public system shall be made in accordance with the current requirements of Chapter 27 of the Code of Ordinances of the City Sault Ste. Marie, Michigan.

Approval is hereby granted to allow the City Building Department to issue a Building Permit to the above Applicant(s) subject to the preceding stipulation and all applicable codes and City Ordinances currently in effect.

_____ Date: _____

(Authorized Signature of Approval)

Title: _____ City of Sault Ste. Marie (This space for Department Use Only)

Original: City Engineering Department

cc: Applicant Building Department Water/Sewer Super. City Assessor

ISSUANCE OF THIS APPROVAL DOES NOT OBTAIN THE NEED TO SATISFY VARIOUS REQUIREMENTS OF OTHER AGENCIES

(Form - November 1989; Revised 03/01/99, 04/08/03)