

Plumbing Permit Application
Clarence Township
 27052 R. Drive N. Albion Mi 49224
 517-857-2288

P 2010 P

| | |
|-------------|----------------------------|
| Authority: | 1972 PA 230 |
| Completion: | Mandatory to obtain permit |
| Penalty: | Permit cannot be issued |

I. Job Location

| | | | |
|--|--|--|--|
| NAME OF OWNER/AGENT | | HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT? | |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required | |
| STREET ADDRESS AND JOB LOCATION (Street Number and Name) | NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED | COUNTY | |
| | <input checked="" type="checkbox"/> Township of: Clarence | Calhoun | |

II. Contractor / Homeowner Information

| | | | | |
|--|--|--|---------------------------|-----------------|
| INDICATE WHO THE APPLICANT IS | | NAME OF PLUMBING CONTRACTOR OR HOMEOWNER | CONTRACTOR LICENSE NUMBER | EXPIRATION DATE |
| <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner <input type="checkbox"/> Master <input type="checkbox"/> Water Treatment Installer | | | | |
| ADDRESS (Street Number and Name) | | CITY | STATE | ZIP CODE |
| TELEPHONE NUMBER (Include Area Code) | | FEDERAL EMPLOYER ID NUMBER (or reason for exemption) | | |
| WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption) | | UIA NUMBER (or reason for exemption) | | |
| NAME OF MASTER PLUMBER | | | MASTER LICENSE NUMBER | EXPIRATION DATE |
| BUSINESS / BRANCH ADDRESS | | CITY | STATE | ZIP CODE |

III. Type of Job

| | | | | | |
|---|-------------------------------------|---|---|--|---|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New | <input type="checkbox"/> Sewer Only | <input type="checkbox"/> Water Service Only | <input type="checkbox"/> Premanufactured Home Setup (State Approved) | <input type="checkbox"/> State Owned |
| <input type="checkbox"/> Other | <input type="checkbox"/> Alteration | <input type="checkbox"/> Special Inspection | | <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home) | <input type="checkbox"/> School |

IV. Plan Review Required

Plans must be submitted with an Application for Plan Examination and the appropriate deposit before a permit can be issued, except as listed below.

Plans are not required for the following:

- One-and two-family dwelling containing not more than 3,500 square feet of building area.
- Alterations and repair work determined by the plumbing official to be of a minor nature.
- Buildings with a required plumbing fixture count less than 12.
- Work completed by a governmental subdivision or state agency costing less than \$15,000.00.

If work being performed is described above, check box below "Plans Not Required."

Plans are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.

BCC Plan Review Project No. _____ **Plans Not Required**

V. Applicant Signature

Section 23a of the state construction code act of 1972, 1972 PA 230, 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. Violators of Section 23a are subjected to civil fines.

| | |
|--|------|
| SIGNATURE OF PLUMBING CONTRACTOR, MASTER PLUMBER, WATER TREATMENT INSTALLER OR HOMEOWNER (Homeowner's signature indicates compliance with Section VI. Homeowner Affidavit) | DATE |
|--|------|

VI. Homeowner Affidavit

I hereby certify the plumbing work described on this permit application shall **be installed by myself in my own home** in which I am living or about to occupy. All work shall be installed in accordance with the Michigan Plumbing Code and **shall not be enclosed, covered up, or put into operation** until it has been **inspected and approved** by the State Plumbing Inspector. I will cooperate with the State Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

Complete Application on Back Side

VIIa. Fee Clarification

Item #2, Mobile Home Unit Site: WHEN item is used for sewer excavations in a new park, the permit application should include the application fee plus the number of unit sites. WHEN setting a mobile home in a park, or a mobile or **modular** home on private property, a permit should include the application fee, a sewer or building drain, and a water service or water distribution pipe.

Vilb. Fee Clarification (continued)

| | | | | | |
|--|------------------------|--------------|-------------------|----------------|--|
| Item #3, Fixtures, Floor Drains, Special Drains, and Water Connected Appliances Include: | | | | | |
| Water Closets | Sink (any description) | Slop Sink | Drinking Fountain | Floor Drain | Water Outlet or Connection to any Make-up Water Tank |
| Bathtub | Emergency Eye Wash | Bidet | Condensate Drain | Roof Drain | Water Outlet or Connection to Heating System |
| Lavatories | Emergency Shower | Cuspidor | Washing Machine | Grease Trap | Water Outlet or Connection to Filters |
| Shower Stall | Garbage Grinder | Dishwasher | Acid Waste Drain | Starch Trap | Connection to Sprinkler System (Irrigation) |
| Laundry Tray | Water Outlet Cooler | Refrigerator | Embalmng Table | Plaster Trap | Water Connected Sterilizer |
| Urinal | Ice Making Machine | Water Heater | Bed Pan Washer | Water Softener | Water Connected Dental Chair |
| Autopsy | Water Connected Still | | | | Water Connection to Carbonated Beverage Dispensers |

Plus Any Other Fixture, Drain, or Water Connected Appliance Not Specifically Listed

Item # 25, Domestic Water Treatment And Filtering Equipment: A license is not required for the installation of domestic water treatment and filtering equipment that requires modification to an existing cold water distribution supply and associated water piping in buildings if a permit is secured, required inspections performed, and the installation complies with the applicable code. If the enforcing agency determines a violation exists, it shall be corrected by the responsible installer. The permit application shall include the application fee, the number of water treatment devices recorded in item #25 for \$5.00 each, and the appropriate water distribution pipe (system) size fee.

VIII. **Fee Chart** - Enter the number of items being installed, multiply by the unit price for total fee.

| | FEE | # ITEMS | TOTAL | | FEE | # ITEMS | TOTAL |
|---|-------------|---------|---------|--|-------------|---------|-------|
| 1. Application Fee (non-refundable) | \$30.00 | | \$30.00 | Watering Distributing Pipe (system) | \$ 5.00 | | |
| 2- Manufactured Homes | \$65.00 | | | 14. 3/4" Water Distribution Pipe | | | |
| 3. Fixtures, floor drains, special drains, water connected appliances | \$5.00 each | | | 15.1" Water Distribution Pipe | \$10.00 | | |
| 4. Stacks (soil, waste, vent and conductor) | \$3.00 each | | | 16. 1-1/4" Water Distribution Pipe | \$15.00 | | |
| 5. Sewage ejectors, sumps | \$5.00 each | | | 17. 1-1/2" Water Distribution Pipe | \$20.00 | | |
| 6. Sub-soil drains | \$5.00 each | | | 18. 2" Water Distribution Pipe | \$25.00 | | |
| Water Service | | | | 19. Over 2" Water Distribution Pipe | \$30.00 | | |
| 7. Less than 2" | \$ 5.00 | | | 20. Reduced pressure zone back-flow preventer | \$5.00 each | | |
| 8. 2" to 6" | \$25.00 | | | 25. Domestic water treatment and filtering equipment only ** | \$ 5.00 | | |
| 9. Over 6" | \$50.00 | | | 26. Medical Gas System | \$45.00 | | |
| 10. Connection (bldg. drain - bldg. sewers) | \$ 5.00 | | | Inspections | \$65.00 | | |
| Sewers (sanitary, storm, or combined) | \$ 5.00 | | | 21. Special/Safety Insp. (includes cent fee) | | | |
| 11. Less than 6" | | | | 22. Inspections | \$65.00 | | |
| 12. 6" & Over | \$25.00 | | | 23. Final Inspection | \$65.00 | | |
| 13. Manholes, Catch Basins | \$5.00 each | | | 24. Certification Fee | \$20.00 | | |

See Vila. Fee Clarification, Item #2 on front
See V111b. Fee Clarification, Item #25 above

Total Fee Must Include \$30.00 non-refundable application fee)

Make checks payable to CLARENCE TOWNSHIP

IX. Instructions for Completing Application

General: Plumbing work shall not be started until the application for permit has been filed with the Bureau of Construction Codes & Fire Safety. All installations shall be in conformance with the Michigan Plumbing Code. No work shall be concealed until it has been inspected. The telephone number for the inspector will be provided on the permit form. When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the job location and permit number.

Expiration of Permit: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED OR REINSTATED.**

Where to Submit Application: The Bureau of Construction Codes & Fire Safety is responsible for code enforcement in units of government throughout the state which have no local program and for all state owned buildings. Permit applications for state issued permits should be sent to the address on the front of this application. If you are not sure whether a state permit or a local permit is appropriate, contact our office or your local building inspector. Questions regarding state issued permits may be directed to the Office of Management Services, Permit Section at 517-241-9313. Code questions may be directed to the Plumbing Division at 517-241-9330.

VALIDATION AREA

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.