

MECHANICAL PERMIT APPLICATION

SHIAWASSEE COUNTY COMMUNITY DEVELOPMENT
 201 NORTH SHIAWASSEE STREET
 SURBECK BUILDING - THIRD FLOOR
 CORUNNA, MI 48817
 PHONE: (989) 743-2396 • FAX: (989) 743-2393
 INSPECTION LINE: (989) 743-2280

Permit # _____

Receipt # _____

- | | | | |
|---------------------------------------|---------------------------------------|--|-----------------------------------|
| <input type="checkbox"/> NEW CONST | <input type="checkbox"/> FURNACE ONLY | <input type="checkbox"/> PRE-MFD/MOD | <input type="checkbox"/> ACC BLDG |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> A/C ONLY | <input type="checkbox"/> HUD/MFD/DW | <input type="checkbox"/> L/P ONLY |
| <input type="checkbox"/> ALTER/REPAIR | <input type="checkbox"/> BOILER ONLY | <input type="checkbox"/> SW OR IN A PARK | |

PROJECT DETAILS _____

DO NOT START WORK BEFORE PERMIT IS ISSUED

Incomplete applications will be rejected

Name of Owner:
Address of Job:
Township/Section/Subdivision/Lot:

CONTRACTOR/HOMEOWNER INFORMATION

Applicant:	
Address:	
City/State/Zip:	
Area Code and Phone Number Homeowner:	Contractor:
Federal Employer Identification Number:	
M.E.S.C. Employer Number:	
Workers Compensation/Disability Insurance Carrier:	
License Number, Expiration Date:	

BUILDING DIMENSIONS (Measured in Sq. Feet)	
Dwelling: 1st floor _____ 2nd floor _____	Att. Garage: _____ Acc. Bldg.: _____
BUILDING TYPE	
<input type="checkbox"/> Frame	<input type="checkbox"/> Masonry
<input type="checkbox"/> Pole	<input type="checkbox"/> Structured Steel
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Other _____
FOUNDATION	
<input type="checkbox"/> Block	<input type="checkbox"/> Poured Wall
<input type="checkbox"/> Wood	<input type="checkbox"/> Trenched Footing
<input type="checkbox"/> Flatwall	<input type="checkbox"/> Other _____
<input type="checkbox"/> Walkout _____ x _____	<input type="checkbox"/> Reg./Unfin. _____ x _____
<input type="checkbox"/> Reg./Fin. _____ x _____	<input type="checkbox"/> Crawlspace _____ x _____
NUMBER OF ROOMS	
# of rooms (excluding bathrooms) _____	
# of bathrooms _____	
# of bedrooms _____	
BASEMENT (please note size)	

HOMEOWNERS AFFIDAVIT: I hereby certify that the mechanical work described above shall be installed by myself in my single family dwelling in which I live or am about to occupy. All work shall be installed in accordance with the Michigan State Mechanical Code and will not be covered, enclosed or put into service until it has been inspected and approved by a Shiawassee County Inspector. I will cooperate with the County and assume all responsibility to arrange for and obtain all necessary inspections. SECTION 23a of the State Construction Codes Act of 1972, Act No. 230 of Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, prohibit a person from conspiring to circumvent the licensing requirements of this State relating to persons who perform work on, or construction of residential buildings.

VIOLATORS OF SECTION 23a ARE SUBJECT TO CIVIL FINES.

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 cancelled when no inspections are requested and conducted within six months of the date of issuance or the date of a previous inspection. Cancelled permits cannot be reinstated.

PERMIT FEES	COST	NO. UNITS	TOTAL
1. Application Fee (non-refundable)	\$ 40.00		\$ 40.00
2. Rough Inspection	40.00		
3. Final Inspection	40.00		
4. Burners Under 400,000 BTU's	40.00		
Over 400,000 BTU's	60.00		
5. Solid Fuel Equipment/Water Heater	40.00		
6. Combined Fuel Furnaces	45.00		
7. Solar Equipment (Each Panel)	35.00		
AIR CONDITIONING, REFRIGERATION AND HEAT PUMPS			
8. Air Conditioning Units	35.00		
9. Heat Pumps	40.00		
AIR HANDLERS/SELF-CONTAINED UNITS			
10. Under 1,500 CFM	25.00		
Over 1,500 CFM	50.00		
DEDICATED VENT SYSTEMS			
11. All Fuel Chimney	25.00		
12. Class "B" Vent	20.00		
13. Exhaust Fan - Kit, Bath, Etc.	15.00		
14. Clothes Dryer	15.00		
HEATERS - GAS FIRED, STEAM/HOT WATER			
15. Unit Heater - Boiler	40.00		
16. Infra-Red Heaters	40.00		
17. Pool Heaters	40.00		
DUCT, GAS PIPING & FIRE SUPPRESSION SYS. (Based on Bid)			
18. Duct System Under \$2,000.00	25.00		
Each additional \$2,000.00	10.00		
19. Duct, Underground Per Inspection	40.00		
20. Gas Piping/Main Lines	25.00		
21. Each Branch Opening	5.00		
22. Hydronic/Process-Piping Main Line:	15.00		
23. Per Floor	250.00		
24. Hydronic Air Handler for Htg.	25.00		
MISCELLANEOUS			
25. Humidifiers	15.00		
26. Electronic Air Cleaner with Washer	15.00		
27. Energy Conservation Device	15.00		
28. Water Heater-Gas, Elect. or Oil Fired	15.00		
29. LPG/Fuel Oil Installation	40.00		
30. Additional Lines	15.00		
31. Evaluation	50.00		
32. Additional Inspection	40.00		
33. Combination Htg./AC	40.00		
TOTAL FEE TO BE PAID			

APPROVED _____

DATE _____

SIGNATURE OF HOMEOWNER/APPLICANT-LICENSEE _____

RECEIVED
(STAMP HERE)