

PLUMBING PERMIT APPLICATION

SHIAWASSEE COUNTY COMMUNITY DEVELOPMENT

Permit # _____

201 NORTH SHIAWASSEE STREET
SURBECK BUILDING - THIRD FLOOR
CORUNNA, MI 48817

Receipt # _____

PHONE: (989) 743-2396 • FAX: (989) 743-2393
INSPECTION LINE: (989) 743-2280

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> NEW CONST | <input type="checkbox"/> PRE-MFD/MOD |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> HUD/MFD/DW |
| <input type="checkbox"/> ALTER/REPAIR | <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	Contractor:
Homeowner:	
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"/> Ratwall	<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 _____

WATER SOURCE

<input type="checkbox"/> Septic/Well	<input type="checkbox"/> Municipal System
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NUMBER OF ROOMS

of rooms (excluding bathrooms) _____
of bathrooms _____
of bedrooms _____

BASEMENT (please note size)

HOMEOWNERS AFFIDAVIT: I hereby certify that the plumbing 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 Plumbing 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		
FIXTURES, DRAINS, WATER CONNECTED APPLIANCES, STACKS			
4. Fixtures, floor drains, special drains, water connected appliances (ea)	8.00		
5. Stacks (soil, waste, vent & conductor, ea.)	6.00		
6. Ejector pump	35.00		
WATER SERVICE			
7. Less than 2"	15.00		
2" to 6"	35.00		
Over 6"	65.00		
8. Water heater (gas or oil fired)	15.00		
9. Connection bldg. drain-bldg. sewers (ea.)	7.00		
10. Water Softener	15.00		
SEWERS (sanitary, storm, or combined)			
11. Less than 6"	10.00		
6" and Over	30.00		
WATER DISTRIBUTING PIPE (system)			
12. 3/4" Water Distribution Pipe	10.00		
1" Water Distribution Pipe	15.00		
1 1/4" Water Distribution Pipe	20.00		
1 1/2" Water Distribution Pipe	25.00		
2" Water Distribution Pipe	30.00		
Over 2" Water Distribution Pipe	35.00		
MISCELLANEOUS			
13. Reduced pressure zone back-flow preventer (ea.)	15.00		
14. Additional Inspection Ea.	40.00		
15. Evaluation	50.00		
TOTAL FEE TO BE PAID			

APPROVED _____

DATE _____

CD-4 SIGNATURE OF HOMEOWNER/APPLICANT-LICENSEE _____

RECEIVED
(STAMP HERE)