PLUMBING PERMIT APPLICATION GAINES TOWNSHIP BUILDING DEPARTMENT

9255 Grand Blanc Road Gaines, MI 48436

Phone: (810) 635-3200 Fax: (989) 271-6038

	APPLICANT IS: CONTRACTOR HOMEOW				MEOMNE	IER			
I. JOB LOCATION									
JOB LOCATION (STREET NO. AND NAME)			CITY		SUBDIVISI		N	LOT NO.	
OWNER'S NAME					TOWNSHIP: GAINES	COUNTY: GENESEE	HAS A BUILDING PERMIT THIS PROJECT? YE		
II. APPLICANT INFORMA	TION								
NAME							AUTHORITY: P.A.230 C COMPLETION: MANDAT	OF 1972, AS AMENDED ORY TO OBTAIN PERMIT	
ADDRESS (STREET NO. AND N	AME)							ANNOT BE ISSUED	
CITY			STATE	ZIP CODE			State License No.	Expiration Date	
SOCIAL SECURITY NUMBER or EXEMPTION)	SOCIAL SECURITY NUMBER or FEDERAL ID NO. (OR REASON FOR EXEMPTION)			NE NUMBER			State Registration No.	Local License Jurisdiction	
WORKERS COMPENSATION INSURANCE CARRIER (OR REASON FOR EXEMPTION)			MESC EMPLYR NO. (OR	MESC EMPLYR NO. (OR REASON FOR EXEMPTION)			Local License Number	Expiration Date	
III. TYPE OF JOB									
Single Family Other	New Alteration	Sewer Water	Special Insp				(State Approved) (HUD Mobile Home)	State Owned School	
What is Size of Building (sq ft)				1	Occupant Load (Commercial/Industrial Uses)				
IV. PLAN REVIEW REQU	IRED								
HAVE PLANS BEEN SUBMIT	TTED? (see below fo	r plan review requirem	nents before completing th	nis section)		Yes	_ No Not R	equired	
Plans are not required									
1. One-& two-family dwelling containing not more than 3,500 sq ft of building area.					Alterations, repair work determined to be of a minor nature by plmb official.				
3. Assembly, Business, Mercantile, & Storage Bldgs with a req'd plumbing fixt count < 12. 4. Work completed by a gov subdivis						vision or state agency costing < \$15,000.			
		<u> </u>	d is described above,						
Plans are required for all 299 of the Public Acts of	1980, as amended,	and shall bear tha	t architect's or engine	er's signatu	ure and sea	l.		I pursuant to Act No.	
	RE	QUIRED PLANS MU	JST BE SUBMITTED E	BEFORE A F	PERMIT CAI	N BE ISSU	ED		
V. APPLICANT SIGNATU	RE								
Section 23a of the state constru who are to perform work on a re						ent the licensi	ng requirements of this sta	ate relating to persons	
x					DATE				
SIGNATURE OF LICENSEE OR	HOMEOWNER (HOMEO	WNER SIGNATURE IN	DICATES COMPLIANCE WI	TH SECTION \	/I. HOMEOWN	ER AFFIDAVI	<u>T</u>)		
VI. HOMEOWNER AFFID.	AVIT								

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 Plumbing Code and shall not be enclosed, covered up or put into operation until it has been inspected and approved by the Plumbing Inspector. I will cooperate with the Plumbing Inspector and assume

the responsibility to arrange for necessary inspections.

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VII. FEE CLARIFICATIONS

ITEM #2. RESIDENTIAL PLUMBING SYSTEM FEE INFORMATION:

If Item #2 is selected, #1 and #25 are required. NO OTHER ITEMS need to be selected. Please include any required detail in "Complete Description of Work" Section

ITEM #3. 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.

REQUIRED: ITEM #4, FIXTURES, FLOOR DRAINS, SPECIAL DRAINS, & WATER CONNECTED APPLIANC

Wtr Closets	Sink (any description)	Slop Sink	Drinking Fountain	Floor Drain	Water outlet/Connection to any Make-up WTr Tank
Bathtub	Emergency Eye Wash	Bidet	Condensate Drain	Roof Drain	Water Outlet/Connection to Heating system
Lavatories	Emergency Shower	Cuspidor	Washing Machine	Grease Trap	Water Outlet/Connection to Filters
Shower Stall	Garbage Grinder	Dishwasher	Acid Waste Drain	Starch Trap	Connection to Sprinkler System (irrigation)
Laundry Try	Water Outlet Cooler	Refrigerator	Embalming Table	Plaster Trap	Water Connected Sterilizer
Urinal	Ice Making Machine	Water Htr	Bed Pan Washer	Wtr Softener	Water Connected Dental Chair
Autopsy	Water Connected Still				Water Connection to Carbonated Bev Dispensers

NEW PERMIT

TO ADD TO EXISTING PERMIT (ADDT'L INSP FEE MAY BE REQUIRED)

COMPLETE DESCRIPTION OF WORK TO BE COMPLETED UNDER THIS PERMIT

EXISTING PERMIT #

COMPLETE DESCRIPTION OF ADDITIONAL WORK

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

		FEE		# ITEMS	TO	TOTAL	
1.	Application Fee	\$	50.00	1	\$	50.00	
2.	Final Inspection - required	\$	50.00	1	\$	50.00	
3.	Inspections - each (rough, undgrd, etc)	\$	50.00				
4.	New Res Plumbing System up to 1,500 sf	\$	75.00				
	New Res Plumbing System - 1,501 - 3,500 sf	\$	125.00				
	New Res Plumbing System - 3,501 - 7,000 sf	\$	175.00				
	New Res Plumbing System - 7,001 sf & over	\$17	75.00 + \$2	25/ 1,000			
5.	Stacks (soil, waste, vent or conductor (ea))	\$	2.00				
6.	Sewage ejectors, sumps (ea)	\$	5.00				
7.	Sub-soil drains (ea)	\$	5.00				
8.	Water service - Less than 2"	\$	5.00				
9.	Water service - 2" - 6"	\$	25.00				
10.	Water Service - over 6"	\$	50.00				
11.	Connection - building drain-building sewers	\$	5.00				
12.	Sewers Less than 6" per 100 lf (sanitary/storm)	\$	5.00				

		FEE	# ITEMS	TOTAL
13. Sewers 6" & Over perf 100 lf (sanitary/storm)	\$	25.00		
14. Manholes, Catch Basins (ea)	\$	5.00		
15. Water Dist Pipe (syst) 3/4" Wtr Dist Pipe	\$	5.00		
16. Water Dist Pipe (syst) 1" Wtr Dist Pipe	\$	10.00		
17. Water Dist Pipe (syst) 1 1/4" Wtr Dist Pipe	\$	15.00		
18. Water Dist Pipe (syst) 1 1/2" Wtr Dist Pipe	\$	20.00		
19. Water Dist Pipe (syst) 2" Wtr Dist Pipe	\$	25.00		
20. Water Dist Pipe (syst) Over 2" Wtr Dist Pipe	\$	30.00		
21. Red press zone back-flow preventer (ea)	\$	5.00		
22. Medical gas	\$	45.00		
23. Special/Safety Inspection (includes Cert Ltr)	\$	50.00		
24. Mobile Home Park Site* (each)	\$	5.00		
25. Fixt, flr drain, spec drain, wtr conn appl - (ea)	\$	4.00		
26. Certification Fee	\$	20.00		
TOTAL FEE				

IX. INSTRUCTIONS FOR COMPLETING APPLICATION

GENERAL: Mechanical work shall not be started until the appl for permit has been filed. All installations shall conform with the Mechanical Code. **No work shall be concealed until it has been inspected.** When ready for an inspection, at least 1 day's notice is required. Permit number and address required.

PERMIT EXPIRATION: A permit remains valid provided work is progressing & inspections are requested & conducted. A permit shall become invalid if the authorized work is not commenced within 6 months after issuance or if work is suspended or abandoned for a period of six months after the time of commencement. A pmt will be cancelled when no inspections are requested/conducted within six months of the date of issuance or the date of a previous inspection. Cancelled pmts cannot be refunded or reinstated.

The Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

DEPARTMENT APPROVAL:

DATE: