Plumbing Permit Application

Michigan Department of Labor & Economic Growth Bureau of Construction Codes P.O. Box 30255 Lansing, MI 48909 517-241-9313

www.michigan.gov/bcc

P 2006 P

Authority: 1972 PA 230

Completion: Mandatory to obtain permit Penalty: Permit cannot be issued

L.Job Location

| I. Job Location | - | | | | Ture a pumpu | 0 DEDLUT DEELL ODTA | INCO FOR THIS | 200 15070 |
|--|--|---------------|--------------------------|---|----------------------|---|----------------|-----------------------|
| NAME OF OWNER/AGENT | | | | HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT? | | | | |
| | | | | | ☐ Yes | ☐ No | | Not required |
| STREET ADDRESS AND JOB LOCATION (Street Number and Name) NAME | | | E OF CITY, VILLAGE OR TO | WNSHIP IN WHICH JOB IS | LOCATED | COUN | TY | |
| | | | I | City UVillage U | Township OF: | | | |
| | | | | Oity D Village D | Township Or. | | | |
| II. Contractor / Home | | tion | | | | | | EXPIRATION DATE |
| | | | IBING CONTRACTOR OR H | ING CONTRACTOR OR HOMEOWNER | | CONTRACTOR LICENSE NUMBER EXPIRAT | | |
| ☐ Contractor ☐ Homeowner | | | | | | | | |
| Master Water Treatment Installer ADDRESS (Street Number and Name) | | | | LOITY | | | | |
| ADDRESS (Street Number | and Name) | | | CITY | STATE | | | ZIP CODE |
| | | | | | | | | |
| TELEPHONE NUMBER (Inc | clude Area Code) | | | <u> </u> | FEDERAL EMPLOYER ID | NUMBER (or reason for | or exemption) | |
| | | | | | | | | |
| | | | | | | | | |
| WORKERS COMPENSATION | ON INSURANCE CAP | RRIER (or rea | son for exemption) |) | MESC EMPLOYER NUM | BER (or reason for exen | nption) | |
| | | | | | | | | |
| NAME OF MASTER PLUM | BER | | | | | MASTER LICENSE | NUMBER | EXPIRATION DATE |
| | | | | | | | | |
| | | | | | | | | |
| BUSINESS / BRANCH ADD | RESS | | | CITY | | STATE | | ZIP CODE |
| | | | | | | | | |
| III. Type of Job | | | | | | • | | |
| III. Type of Job | | | | | | | | 1 |
| ☐ Single Family | □ New | ☐ Sewe | r Only | | ☐ Premanufacture | d Home Setup (St | ate Approved | ☐ State Owned |
| | | lп | | Only | | 0 / // // // // // // // // // // // // | | Па |
| ☐ Other | □ Other □ Alteration □ Special Inspection □ Manufactured Home Setup (HUD Mobile Home) □ School | | | | School | | | |
| IV. Plan Review Requ | uired | | | | | | | |
| Plans must be sub | mitted with an | Applicati | on for Plan E | Examination and the | appropriate deposi | t before a permi | t can be issu | ued, 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. | | | | | | | | |
| | | | | | or nature. | | | |
| Buildings with a required plumbing fixture count less than 12. White the state of the | | | | | | | | |
| 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." | | | | | | | | |
| The 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. | | | | | | | | |
| | | - | | | _ | | | |
| Plan Review Submi | ssion No | | | | ☐ Plans No | t Required | | |
| V. Applicant Signatu | re | | | | | | | |
| Section 23a of the s | tate constructi | on code a | ct of 1972. 19 | 72 PA 230. MCL 125. | 1523A. prohibits a p | erson from cons | piring to circ | umvent the licensing |
| 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 DATE | | | | | | | | |
| compliance with Section VI. Homeowner Affidavit) | | | | | | | | |
| l | | | | | | | | |

VI. Homeowner Affidavit

I hereby certify the plumbing work described on this permit application shall <u>be installed by myself in my own home</u> 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.

| 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 | Embalming 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 |
|--|-------------|---------|---------|
| 1. Application Fee (non-refundable) | \$50.00 | 1 | \$50.00 |
| 2. Mobile Home Park Site* | \$5.00 each | | |
| Fixtures, floor drains, special drains, water connected appliances | \$5.00 each | | |
| 4. Stacks (soil, waste, vent and conductor) | \$3.00 each | | |
| 5. Sewage ejectors, sumps | \$5.00 each | | |
| 6. Sub-soil drains | \$5.00 each | | |
| Water Service | | | |
| 7. Less than 2" | \$5.00 | | |
| 8. 2" to 6" | \$25.00 | | |
| 9. Over 6" | \$50.00 | | |
| 10. Connection (bldg. drain-bldg. sewers) | \$5.00 | | |
| Sewers (sanitary, storm or combined) | | | |
| 11. Less than 6" | \$5.00 | | |
| 12. 6" and Over | \$25.00 | | |
| 13. Manholes, Catch Basins | \$5.00 each | | |

| | Fee | # Items | Total |
|---|-------------|---------|-------|
| Water Distributing Pipe (system) | | | |
| 14. 3/4" Water Distribution Pipe | \$5.00 | | |
| 15. 1" Water Distribution Pipe | \$10.00 | | |
| 16. 1-1/4" Water Distribution Pipe | \$15.00 | | |
| 17. 1-1/2" Water Distribution Pipe | \$20.00 | | |
| 18. 2" Water Distribution Pipe | \$25.00 | | |
| 19. Over 2" Water Distribution Pipe | \$30.00 | | |
| 20. Reduced pressure zone back-flow preventer | \$5.00 each | | |
| 25. Domestic water treatment and filtering equipment only ** | \$5.00 | | |
| 26. Medical Gas System | \$45.00 | | |
| Inspections | | | |
| 21. Special/Safety Insp. (includes cert. fee) | \$50.00 | | |
| 22. Additional Inspection | \$50.00 | | |
| 23. Final Inspection | \$50.00 | | |
| 24. Certification Fee | \$20.00 | | |

Total Fee (Must include the \$50.00 non-refundable application fee)

Make checks payable to "State of Michigan"

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. 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 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.

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.

VALIDATION AREA

^{*} See VIIa. Fee Clarification Item #2 on front **See VIIb. Fee Clarification Item #25 above

[&]quot;See VIID. Fee Clarification Item #25 above