

BERGLAND TOWNSHIP  
P.O. BOX 326  
101 PINE ST  
BERGLAND, MI. 49910

BUILDING PERMIT APPLICATION FOR  
NEW HOMES – ADDITIONS – COMMERCIAL & INDUSTRIAL BUILDINGS



# BERGLAND TOWNSHIP

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Phone: 906-575-3522

**Building Inspector:** (No normal hours, please call before)  
Roman Tauer 906-364-9645

**Electrical, Plumbing, Mechanical:** State Of Michigan  
Phone 517-241-9302

**Zoning Administrator:** No Normal office hours  
Tom Paulman: 906-575-9060

**Health Department:** (800) 222-1222 or (906) 884-4485

Bergland Township has developed this application packet to assist you in your building needs. Our Building Inspector does not hold regular office hours and will accept phone calls at home.

All information requested needs to be turned in. Incomplete information will only delay your permit process.

When necessary, well and septic permits are required and zoning approval before a building permit will be issued.

We hope that you have all information necessary to start your project. Each form is self-explanatory, but if you have questions please contact us.

PERMITS FOR ELECTRICAL, PLUMBING AND MECHANICAL  
MUST BE APPLIED FOR THROUGH THE STATE OF MICHIGAN

**BERGLAND TOWNSHIP**

101 PINE ST.  
P.O. BOX 91  
BERGLAND MI. 49910

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**BUILDING PERMIT REQUIREMENTS**

1. COMPLETED APPLICATION, INCLUDING SITE PLAN
2. FLOOR PLAN, FRONT AND SIDE VIEW OF BUILDING, INCLUDING MEASUREMENTS.
3. COPY OF STATE WELL AND SEPTIC PERMITS IF NEEDED
4. SPECIFICATION SHEET COMPLETED
5. CONTRACTOR INFORMATION OR AFFIDAVIT COMPLETED
6. COPY OF PROPERTY TAX STATEMENT OR LEGAL DESCRIPTION OF PROPERTY

**FIVE INSPECTIONS ARE REQUIRED**

1. FOOTING, BEFORE CONCRETE IS POURED
2. FOUNDATION, PRIOR TO BACKFILLING
3. ROUGH IN, BEFORE INSULATION IS INSTALLED
4. INSULATION, PRIOR TO COVERING UP ALL INSULATION
5. FINAL, PRIOR TO BUILDING BEING OCCUPIED

NOTICE: A CERTIFICATE OF OCCUPANCY IS REQUIRED BEFORE IT CAN BE OCCUPIED

BUILDING INSPECTOR MUST BE GIVEN 48 HOUR NOTICE FOR ALL REQUIRED BUILDING INSPECTIONS!!!

This application must be approved by the building official, fee paid and permit issued before any construction can commence.

**BUILDING INSPECTOR: ROMAN TAUER**  
**PHONE: 906-364-9645**  
**LEAVE MESSAGE ON MACHINE IF NO ANSWER**

**BUILDING SPECIFICATIONS**

1. FOOTING WIDTH \_\_\_\_\_ DEPTH \_\_\_\_\_ RODDED \_\_\_\_\_ ?
2. FOUNDATION WALL MATERIAL \_\_\_\_\_
3. NUMBER OF CRAWL SPACE VENTS \_\_\_\_\_ SIZE \_\_\_\_\_
4. NUMBER OF BASEMENT WINDOWS \_\_\_\_\_ SIZE \_\_\_\_\_
5. FLOOR JOISTS \_\_\_\_\_ X \_\_\_\_\_ 'S \_\_\_\_\_ OC \_\_\_\_\_ SPAN
6. TYPE OF BEAM \_\_\_\_\_ SIZE \_\_\_\_\_
7. SUBFLOOR MATERIAL \_\_\_\_\_ FLOORING \_\_\_\_\_
8. STUD SIZE \_\_\_\_\_ X \_\_\_\_\_ 'S \_\_\_\_\_ ON CENTER
9. EXTERIOR SHEATHING \_\_\_\_\_ SIDING \_\_\_\_\_
10. INTERIOR WALL & CEILING MATERIAL \_\_\_\_\_
11. HEIGHT OF BEDROOM WINDOWS FROM FLOOR TO OPENING \_\_\_\_\_
12. CEILING JOIST SIZE \_\_\_\_\_ X \_\_\_\_\_ 'S \_\_\_\_\_ OC \_\_\_\_\_ SPAN
13. RAFTER SIZE \_\_\_\_\_ X \_\_\_\_\_ 'S \_\_\_\_\_ OC \_\_\_\_\_ SPAN
14. ROOF PITCH \_\_\_\_\_ SHEATHING \_\_\_\_\_ COVERING \_\_\_\_\_
15. INSULATION THICKNESS \_\_\_\_\_ ROOF \_\_\_\_\_ WALLS
16. SMOKE DETECTORS (REQUIRED FOR HOME) \_\_\_\_\_
17. INCLUDE FLOOR PLAN WITH DEMENSIONS AND DRAWINGS OF STRUCTURE
18. ADDITIONAL COMMENTS. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 20 .PROJECT DESCRIPTION: (Describe your project in detail using sizes where needed)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Building Permit Application

Bergland Township  
Building Division  
P.O. Box 326  
Bergland, MI. 49910  
Phone: 906-575-3522

Authority: 1972 PA 230	Property ID No. _____		
Penalty: Failure to provide the information may result in denial of your request.			
<b>Project or Facility Information</b>			
PROJECT NAME		ADDRESS	
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED		CITY	ZIP CODE
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township		OF:	
COUNTY	BETWEEN	AND	
<b>Applicant</b>			
NAME		E-MAIL	
ADDRESS	CITY	STATE	ZIP CODE
		TELEPHONE NUMBER (Include Area Code)	
<b>Owner or Lessee</b>			
NAME		ADDRESS	
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)
<b>Signature</b>			
I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.			
<div style="border: 1px solid black; padding: 5px;">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.</div>			
SIGNATURE OF OWNER (Required)		TYPE OR PRINT	
SIGNATURE OF OWNER'S AGENT		TYPE OR PRINT	
BUILDING PERMIT FEE ENCLOSED			
Validation - For Department Use Only			VALIDATION AREA



**B. Buildings Regulated by the Michigan Building Code**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> (A-1) ASSEMBLY (THEATRES, ETC.)            | <input type="checkbox"/> (H-1) HIGH HAZARD (DETONATION)         | <input type="checkbox"/> (M) MERCANTILE                           |
| <input type="checkbox"/> (A-2) ASSEMBLY (RESTAURANTS, BARS, ETC.)   | <input type="checkbox"/> (H-2) HIGH HAZARD (DEFLAGRATION)       | <input type="checkbox"/> (R-1) RESIDENTIAL 1 (HOTELS, MOTELS)     |
| <input type="checkbox"/> (A-3) ASSEMBLY (CHURCHES, LIBRARIES, ETC.) | <input type="checkbox"/> (H-3) HIGH HAZARD (COMBUSTION)         | <input type="checkbox"/> (R-2) RESIDENTIAL 2 (MULTIPLE FAMILY)    |
| <input type="checkbox"/> (A-4) ASSEMBLY (INDOOR SPORTS, ETC.)       | <input type="checkbox"/> (H-4) HIGH HAZARD (HEALTH HAZARD)      | <input type="checkbox"/> (R-3) RESIDENTIAL 3 (CHILD & ADULT CARE) |
| <input type="checkbox"/> (A-5) ASSEMBLY (OUTDOOR SPORTS, ETC.)      | <input type="checkbox"/> (H-5) HIGH HAZARD (HPM)                | <input type="checkbox"/> (R-4) RESIDENTIAL 4 (ASSISTED LIVING)    |
| <input type="checkbox"/> (B) BUSINESS                               | <input type="checkbox"/> (I-1) INSTITUTIONAL 1 (SUPERVISED)     | <input type="checkbox"/> (S-1) STORAGE 1 (MODERATE HAZARD)        |
| <input type="checkbox"/> (E) EDUCATION                              | <input type="checkbox"/> (I-2) INSTITUTIONAL 2 (HOSPITALS ETC.) | <input type="checkbox"/> (S-2) STORAGE 2 (LOW HAZARD)             |
| <input type="checkbox"/> (F-1) FACTORY (MODERATE HAZARD)            | <input type="checkbox"/> (I-3) INSTITUTIONAL 3 (PRISONS ETC.)   | <input type="checkbox"/> (U) UTILITY (MISCELLANEOUS)              |
| <input type="checkbox"/> (F-2) FACTORY (LOW HAZARD)                 | <input type="checkbox"/> (I-4) INSTITUTIONAL 4 (DAY CARE ETC.)  |   |

Alteration, repairs and additions - Provide a description of the work to be covered by the building permit. As examples; 20,000 square foot school roof covering, building a 2,300 square foot school addition, replace 5 exterior doors, renovate basement in a residence, etc.

**Building Data**

**A. Type of Mechanical**

WILL THERE BE FIRE SUPPRESSION?  YES  NO

**B. Type of Construction**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> 1A - Non Combustible (Protected Structural Elements) 3HR | <input type="checkbox"/> 1B - Non Combustible (Rated Structural Elements) 2HR | <input type="checkbox"/> 2A - Non Combustible (Rated Structural Elements) 1HR |
| <input type="checkbox"/> 2B - Non Combustible (Non Rated Structural Elements)     | <input type="checkbox"/> 3A - Non Combustibles (Exterior Walls Only)          | <input type="checkbox"/> 3B - Non Combustible (Bearing Walls Rated)           |
| <input type="checkbox"/> 4 - Heavy Timber   | <input type="checkbox"/> 5A - Combustible (Structural Elements Rated) 1HR     | <input type="checkbox"/> 5B - Combustible (All Elements Not Rated)            |

**C. Dimensions / Data**

FLOOR AREA:	EXISTING	ALTERATIONS	NEW
BASEMENT	_____	_____	_____
1ST & 2ND FLOOR	_____	_____	_____
3RD - 10TH FLOOR	_____	_____	_____
11TH - ABOVE	_____	_____	_____
TOTAL AREA	_____	_____	_____

**D. Number of Off Street Parking Spaces**

ENCLOSED \_\_\_\_\_ OUTDOORS \_\_\_\_\_

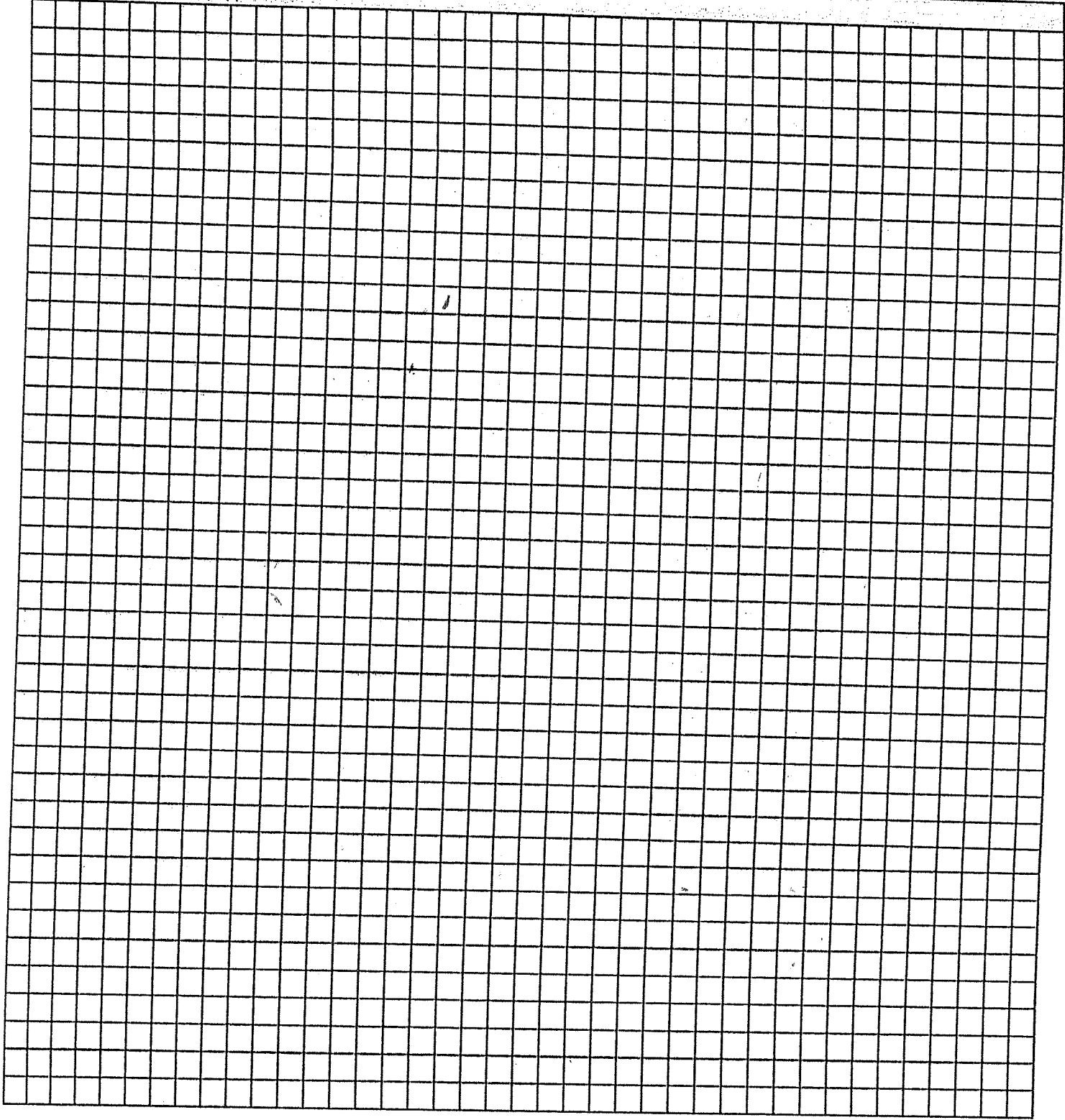
# BERGLAND TOWNSHIP

Local Governmental Agency to Complete This Section

## ENVIRONMENTAL CONTROL APPROVALS

	REQUIRED?	APPROVED	DATE	NUMBER	BY
A - Zoning	<input type="checkbox"/> Yes <input type="checkbox"/> No				
B - Fire District	<input type="checkbox"/> Yes <input type="checkbox"/> No				
C - Pollution Control	<input type="checkbox"/> Yes <input type="checkbox"/> No				
D - Noise Control	<input type="checkbox"/> Yes <input type="checkbox"/> No				
E - Soil Erosion	<input type="checkbox"/> Yes <input type="checkbox"/> No				
F - Flood Zone	<input type="checkbox"/> Yes <input type="checkbox"/> No				
G - Water Supply	<input type="checkbox"/> Yes <input type="checkbox"/> No				
H - Sewer	<input type="checkbox"/> Yes <input type="checkbox"/> No				
I - Variance Granted	<input type="checkbox"/> Yes <input type="checkbox"/> No				
J - Other	<input type="checkbox"/> Yes <input type="checkbox"/> No				

**IX. Site or Plot Plan - For Applicant Use**



**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 365 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 365 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT**

ONTONAGON COUNTY  
SOIL EROSION AND SEDIMENTATION  
POLLUTION CONTROL APPLICATION  
PART 91 OF ACT 451 OF 1994

APPLICANT NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
LOCATION: SECTION \_\_\_\_\_ TOWN \_\_\_\_\_ RANGE \_\_\_\_\_ TOWNSHIP \_\_\_\_\_  
CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_  
PROPOSED EARTH CHANGES \_\_\_\_\_  
SIZE OF CHANGE \_\_\_\_\_  
DISTANCE TO NEAREST WATER \_\_\_\_\_  
PROJECT START DATE \_\_\_\_\_ COMPLETION DATE \_\_\_\_\_  
COST OF EROSION CONTROL \_\_\_\_\_

NAME AND ADDRESS \_\_\_\_\_  
OF PLAN PREPARER \_\_\_\_\_

NAME AND ADDRESS \_\_\_\_\_  
OF RESPONSIBLE PARTIES \_\_\_\_\_  
FOR THE EARTH CHANGE \_\_\_\_\_

PERFORMANCE DEPOSIT \_\_\_\_\_

I (WE) AFFIRM THAT THE ABOVE INFORMATION IS CORRECT AND I (WE) WILL CONDUCT THE ABOVE EARTH CHANGE IN ACCORDANCE WITH PART 91 OF ACT 451 OF 1994, STATE OF MICHIGAN AS AMENDED, ITS RULES AND ORDINANCES.

OWNERS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
ADDRESS \_\_\_\_\_

SEND COMPLETED APPLICATION TO: DWAYNE KOLPACK - Phone (906) 884-4980  
ONTONAGON COUNTY COURTHOUSE  
725 GREENLAND ROAD  
ONTONAGON, MI. 49953

NOTE: A COMPLETE SET OF EARTH CHANGE PLANS MUST BE ATTACHED TO THIS APPLICATION WHEN RETURNED.

ONTONAGON COUNTY  
SOIL EROSION AND SEDIMENTATION CONTROL AGENCY  
PERMIT FEE SCHEDULE

ONE AND TWO FAMILY DWELLINGS

Up to one acre- plan review and permit fee	\$100 (includes 1 inspection)
Each additional acre or fraction thereof	\$10
Additional inspections	\$30 per inspection

COMMERCIAL & INDUSTRIAL, UTILITIES, AND TRANSPORTATION FACILITY

Up to one acre- plan review and permit fee	\$200 (includes 1 inspection)
Each additional acre or fraction thereof	\$20
Additional inspections	\$30 each

WATER IMPOUNDMENTS (PONDS & DAMS)

Up to one acre- plan review and permit fee	\$100 (includes 1 inspection)
Each additional acre or fraction thereof	\$10
Additional inspections	\$30 each

**Electrical Permit Application**  
 Michigan Department of Licensing and Regulatory Affairs  
 Bureau of Construction Codes  
 P.O. Box 30255, Lansing, MI 48909  
 517-241-9313  
 www.michigan.gov/bcc

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Authority: 1972 PA 230 Completion: Mandatory to obtain permit Penalty: Permit can not be issued	LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.
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**I. Project or Facility Information**

NAME OF OWNER/AGENT/SCHOOL/STATE DEPT.	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 <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township    OF:
COUNTY	

**II. Applicant/Facility Contact Information**

INDICATE WHO THE APPLICANT IS <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner	NAME OF HOMEOWNER/CONTRACTOR	STATE LICENSE NUMBER	EXPIRATION DATE
ADDRESS (Street Number and Name)		STATE REGISTRATION NUMBER	EXPIRATION DATE
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)		

**III. Type of Job**

<input type="checkbox"/> Single Family	<input type="checkbox"/> New	<input type="checkbox"/> 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 Information**

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:  
 1. When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area.  
 2. 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."

What is the rating of the service or feeder in ampere? \_\_\_\_\_  
 What is the building size in square footage? \_\_\_\_\_

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 CONTRACTOR OR HOMEOWNER (Homeowner signature indicates compliance with Section VI. Homeowner Affidavit)	DATE
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**VI. Homeowner Affidavit**

I hereby certify the electrical 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 Electrical Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the State Electrical Inspector. I will cooperate with the State Electrical Inspector and assume the responsibility to arrange for necessary inspections.

Complete Application on Back Side

**Item #17, Mobile Home Unit Site:**

When installing a site service in a park, the permit application must include the application fee, service, the number of park sites and a final inspection. When setting a HUD mobile home in a park, a permit must include the application fee, service, feeder and a final inspection. These shall be done by a licensed electrical contractor. When setting a HUD mobile home or a premanufactured home on private property, a permit must include the application fee, service, feeder and a final inspection.

	Fee	# Items	Total
1. Application Fee (non-refundable)	\$75.00	1	\$75.00
<b>Service</b>			
2. Through 200 Amp.	\$10.00		
3. Over 200 Amp. thru 600 Amp.	\$15.00		
4. Over 600 Amp. thru 800 Amp.	\$20.00		
5. Over 800 Amp. thru 1200 Amp.	\$25.00		
6. Over 1200 Amp. (GFI only)	\$50.00		
7. Circuits	\$5.00		
8. Lighting Fixtures/Outlets - per 25	\$6.00		
9. Dishwasher	\$5.00		
10. Furnace - Unit Heater	\$5.00		
11. Electrical - Heating Units (baseboard)	\$4.00		
12. Power Outlets (ranges, dryers, etc.)	\$7.00		
<b>Signs</b>			
13. Unit	\$10.00		
14. Letter (each)	\$15.00		
15. Neon - each 25 feet	\$20.00		
16. Feeders-Bus Ducts, etc. - per 50'	\$6.00		
17. Mobile Home Park Site*	\$6.00		
18. Recreational Vehicle Park Site	\$4.00		

	Fee	# Items	Total
K.V.A., H. P., Wind Turbines, ***EVSE and ****PV Modules			
19. Units up to 20 K.V.A. or H.P./Per PV Module	\$6.00		
20. Units 21 to 50 K.V.A. or H.P./Per PV Module	\$10.00		
21. Units > 50 K.V.A. or H.P./Per PV Module	\$12.00		
<b>Fire Alarm Systems (not smoke detectors)</b>			
22. Up to 10 devices	\$50.00		
23. 11 to 20 devices	\$100.00		
24. Over 20 devices	\$5.00 ea.		
<b>Data / Telecommunication Outlets</b>			
31. 1 - 19 devices	\$5.00 ea.		
32. 20 - 300 devices	\$100.00		
33. Over 300 devices	\$300.00		
<b>Energy Management Temp. Control</b>			
25. Energy Retrofit - Temp. Control	\$45.00		
34. Devices - Energy Management	\$5.00		
26. Conduit only or grounding only	\$45.00		
<b>Inspections</b>			
27. Special Insp. (pertaining to sale of building) (does not include an electrical service inspection)	\$75.00		
28. Additional Inspection	\$75.00		
29. Final Inspection	\$75.00	1	\$75.00
30. Certification Fee**	\$30.00		

- \* See VII. Fee Schedule Item #17 above
- \*\* Required for all school and state-owned construction projects
- \*\*\* EVSE - Electrical Vehicle Supply Equipment
- \*\*\*\* PV Modules - Photovoltaic

NOTE: Under special circumstances the bureau will assess an hourly fee for inspection services at a rate of \$75.00 per hour.

Total Fee (Must include the \$75 non-refundable application and \$75 final inspection fees.)

**VIII. Instructions for Completing Application**

**Make checks payable to "State of Michigan"**

**General:** Electrical 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 Electrical 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 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00.**

**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 as well as public and charter school construction where a local delegation of authority does not exist. 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 Electrical Division at 517-241-9320.

**VALIDATION AREA**



7150 Harris Drive, P.O. Box 30255  
Lansing, MI 48909

Date of Application \_\_\_\_\_

State Owned:  YES  No

AUTHORITY: ACT 230, PA 1972, as Amended  
 COMPLETION: Installation Shall Not Be Started  
 Until Application is Filed  
 PENALTY: Written Order To Stop Construction

**I. JOB LOCATION**

Name of Owner/Agent \_\_\_\_\_

Has a building permit been obtained for this project?  
 YES  NO  NOT REQUIRED

Street Address & Job Location (Street No. and Name) \_\_\_\_\_

City/Village \_\_\_\_\_ Township \_\_\_\_\_ County \_\_\_\_\_

**II. CONTRACTOR/HOMEOWNER INFORMATION**

Contractor  Homeowner Name (Check Appropriate Box)

License Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Address (Street No. and Name) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Social Security Number \_\_\_\_\_ Federal Employer ID Number (or reason for exemption) \_\_\_\_\_

Workers Compensation Insurance Carrier (or reason for exemption) \_\_\_\_\_ MESC Employer Number (or reason for exemption) \_\_\_\_\_

Section 23a of the State Construction Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, 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 subject to civil fines.

Signature of Licensee or Homeowner \_\_\_\_\_ (Homeowner must also sign affidavit on back)

**III. TYPE OF JOB**

Single Family  1. New  2. Remodel  5. Sewer Only

Other  3. New  4. Remodel  6. Water Service Only

7. Special Inspection Only  8. Mobile Home Setup  9. Modular Home Setup

**IV. PLAN REVIEW REQUIRED**

A plan review may be required before work is started, on any building other than a single family dwelling less than 3,500 square feet. See reverse side for details. **Have plans been submitted for plan review?**

YES  NO  NOT REQUIRED

**V. 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)	\$30.00	1	\$30.00
2. Mobile Home unit site (see reverse)	\$5.00 each		
3. 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" & Over	\$25.00		

	FEE	# ITEMS	TOTAL
13. Manholes, Catch Basins	\$5.00 each		
Watering 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		
21. Special/Safety Insp. (Includes cert. fee)	\$45.00		
22. Additional Inspection	\$30.00		
23. Final Inspection	\$30.00		
24. Certification Fee	\$10.00		

MAKE CHECKS PAYABLE TO "STATE OF MICHIGAN" TOTAL FEES \_\_\_\_\_

VALIDATION AREA-OFFICE USE ONLY

# PLUMBING PERMIT APPLICATION

## I. 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 State 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.

Signature of homeowner

## II. LEAD FREE NOTICE

The State Construction Code Act, Act No. 230 of the Public Acts of 1972, as amended, requires pipes, pipe fittings, solder or flux, which are used in the installation or repair of a plumbing system in a building or structure, providing water for human consumption or a public water system, be lead free. Lead free is defined as solder or flux containing not more than 0.2% lead; and pipe and pipe fittings containing not more than 8% lead. These provisions do not apply to leaded joints necessary for the repair of cast iron pipes.

## III. FEE CLARIFICATIONS

**ITEM #2, MOBILE HOME UNIT SITE:** This 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, and a water service.

### ITEM #3, FIXTURES, FLOOR DRAINS, SPECIAL DRAINS, & 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
Bath tub	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 Softner	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

## X. PLAN REVIEW REQUIREMENTS

Plans and specifications for new construction work, alteration, repair, expansion, addition, or modification work shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to Act No. 299 of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal. **A PLAN REVIEW IS REQUIRED BEFORE A PERMIT CAN BE ISSUED.**

- Exception 1: Alterations and repair work determined by the plumbing official to be of a minor nature.
- Exception 2: Work completed by a governmental subdivision or state agency costing less than \$15,000.00.
- Exception 3: A building of use group R-3 or R-4 containing not more than 3,500 square feet of building area.
- Exception 4: Assembly, Business, Mercantile and Storage buildings with a required plumbing fixture count less than 12.

## VI. 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 State Plumbing Code. **No work shall be concealed until it has been inspected.**

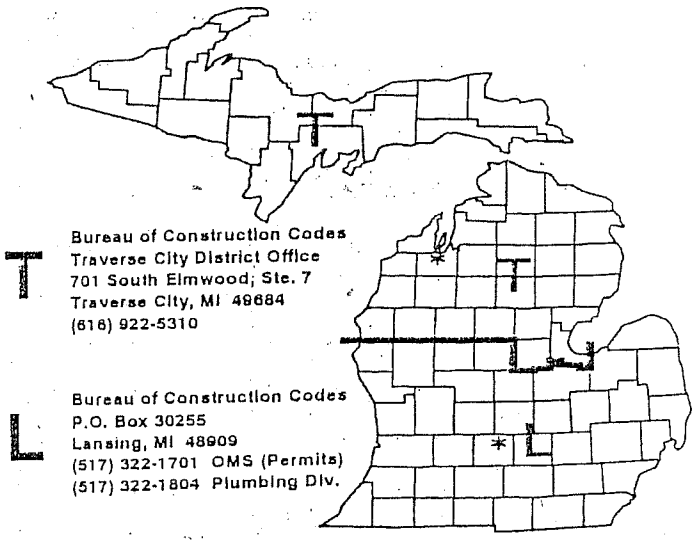
The name of the inspector and the telephone number will be provided on the permit form. When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the location and permit number.

**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 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.**

**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. If you are not sure whether a state permit or a local permit is appropriate, contact one of our offices or your local building inspector.

The Bureau of Construction Codes issues permits from two locations as shown on the map. The permit application should be sent to the district office serving the county in which proposed construction is located. For example, if the application for permit is for a building in Wexford County, the application should be submitted to the Traverse City office.

When a permit is issued, the permit number will be prefixed by a T (Traverse City) or L (Lansing). Questions regarding permits should be directed to the appropriate office.





# MECHANICAL PERMIT APPLICATION

**IX. 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)	\$30.00	1	\$30.00
2. Residential Heating System (includes duct & pipe)	\$50.00		
3. Gas/Oil Burning Equipment - New and/or Conversion Units	\$30.00		
4. Residential Boiler	\$30.00		
5. Water Heater	\$5.00		
6. Flue/Vent Damper	\$5.00		
7. Solid Fuel Equip. (Includes chimney)	\$30.00		
8. Chimney, Factory built - installed separately	\$25.00		
9. Solar; set of 3 panels (includes piping)	\$20.00		
10. Gas Piping; each opening - new installation	\$5.00		
11. Residential A/C	\$30.00		
12. Heat Pumps; Complete Residential	\$30.00		
13. Bath & Kitchen exhaust	\$5.00		
Tanks - 14. Aboveground	\$20.00		
- 15. Underground	\$25.00		
16. Humidifiers	\$10.00		
17. Piping - minimum \$25.00	\$.05 / ft.		
18. Duct - minimum \$25.00	\$.10 / ft.		

	FEE	# ITEMS	TOTAL
19. Heat Pumps; Commercial (pipe not included)	\$20.00		
Air Handlers/Heat Wheels			
20. Under 10,000 CFM	\$20.00		
21. Over 10,000 CFM	\$60.00		
22. Commercial Hoods	\$15.00		
23. Heat Recovery Units	\$10.00		
24. V.A.V. Boxes	\$10.00		
25. Unit Ventilators	\$10.00		
26. Unit Heaters (Terminal Units)	\$15.00		
27. Fire Suppression/Protection - minimum \$20.00 per head	\$.75		
28. Evaporator Coils	\$30.00		
29. Refrigeration (Split System)	\$30.00		
30. Chiller	\$30.00		
31. Cooling Towers	\$30.00		
32. Compressor	\$30.00		
33. Special/Safety Insp. (includes cert. fee)	\$45.00		
34. Additional Inspection	\$30.00		
35. Final Inspection	\$30.00		
36. Certification Fee	\$10.00		

**MAKE CHECKS PAYABLE TO "STATE OF MICHIGAN"**

## X. INSTRUCTIONS FOR COMPLETING APPLICATION

**GENERAL:** Mechanical 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 State Mechanical Code. **No work shall be concealed until it has been inspected.**

The name of the inspector and the telephone number 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 location and permit number.

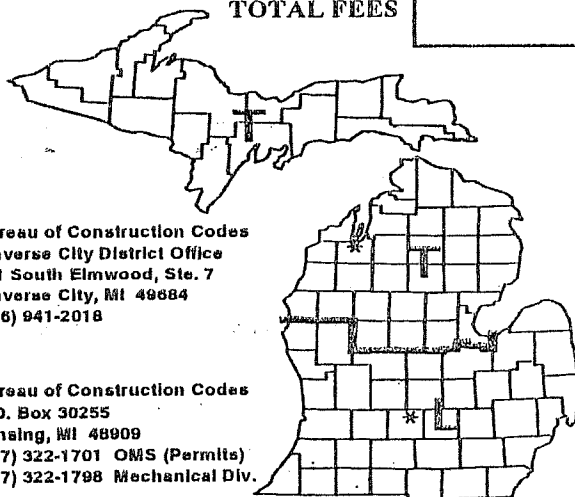
**EXPIRATION OF PERMIT:** A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within six months after issuance of the permit or if the authorized work is suspended or abandoned for a period of six months after the time of commencing the work. **A PERMIT WILL BE 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.**

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TOTAL FEES



**T**  
 Bureau of Construction Codes  
 Traverse City District Office  
 701 South Elmwood, Ste. 7  
 Traverse City, MI 49684  
 (616) 941-2018

**L**  
 Bureau of Construction Codes  
 P.O. Box 30255  
 Lansing, MI 48909  
 (517) 322-1701 OMS (Permits)  
 (517) 322-1798 Mechanical Div.