

PLUMBING PERMIT APPLICATION

GAINES CHARTER TOWNSHIP

8555 Kalamazoo Avenue SE

Caledonia, MI 49316

(616) 698-6640 ext. 27 Fax (616) 698-2490

| | | | |
|--|-------------------------------------|---|--|
| Date of Application _____ | | Authority: Completion: Penalty: | 1972 PA 230 Mandatory to obtain permit Permit cannot be issued |
| I. Job Location | | | |
| NAME OF OWNER/AGENT | | PH. NO. | HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT? |
| | | | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required |
| STREET ADDRESS & JOB LOCATION (Street No. and Name) | | NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED | |
| | | <input type="checkbox"/> City <input type="checkbox"/> Village <input checked="" type="checkbox"/> Township GAINES CHARTER | |
| | | KENT | |
| II. Contractor / Homeowner Information | | | |
| INDICATE WHO THE APPLICANT IS | | NAME OF PLUMBING CONTRACTOR OR HOMEOWNER | CONTRACTOR LICENSE NUMBER |
| <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner | | | |
| <input type="checkbox"/> Master <input type="checkbox"/> Water Treatment Installer | | | |
| ADDRESS (Street No. and Name) | | MASTER LICENSE NUMBER | NAME OF MASTER PLUMBER |
| | | | |
| CITY | STATE | ZIP CODE | EXPIRATION DATE |
| | | | |
| TELEPHONE NUMBER (Include Area Code) | | FEDERAL EMPLOYER ID NUMBER (or reason for exemption) | |
| | | | |
| WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption) | | MESC EMPLOYER NUMBER (or reason for exemption) | |
| | | | |
| BUSINESS ADDRESS | | CITY | STATE |
| | | | ZIP CODE |
| III. Type of Job | | | |
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New | <input type="checkbox"/> Sewer Only <input type="checkbox"/> Water Only | <input type="checkbox"/> Premanufactured Home Setup (State Approved) |
| <input type="checkbox"/> Other | <input type="checkbox"/> Alteration | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home) |
| IV. Plan Review Required | | | |
| Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, except as listed below. | | | |
| Plans are not required for the following: | | | |
| 1. One-and two family dwelling containing not more than 3,500 square feet of building area. | | | |
| 2. Alterations and repair work determined by the plumbing official to be of a minor nature | | | |
| 3. Buildings with a required plumbing fixture count less than 12. | | | |
| 4. 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." | | | |
| 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 Submission No. _____ | | Plans Not Required <input type="checkbox"/> | |
| V. Application 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 the 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 PLUMBING CONTRACTOR, MASTER PLUMBER, WATER TREATMENT INSTALLER OR HOMEOWNER (Homeowner signature indicates compliance with Section VI. Homeowner Affidavit) | | DATE | |
| | | | |
| VI. 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 Michigan Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Gaines Township Plumbing Inspector. I will cooperate with the Gaines Township 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, service, plus the number of park sites. WHEN setting a mobile home in a park, or a mobile or **modular** home on private property, a permit should include the administrative fee, a sewer or building drain, and a water service or water distribution pipe.

VIIb. Fee Clarification (continued)

| 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 |
| 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 administrative fee, the number of water treatment devices recorded in item #25 (see item 3) for \$5.00 each, and the appropriate water distribution pipe (system) size fee.

ITEM #26, MEDICAL GAS SYSTEMS shall include the administrative fee, one Special/Safety Inspection-Medical Gas System #26 (see item #21), and the estimated number of additional inspections in @24.

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

| | Fee | #Items | Total | | Fee | #Items | Total |
|---|--------------|--------|---------|---|--------------|--------|-------|
| 1. Administrative Fee (non-refundable) Does not include an inspection | \$30.00 | 1 | \$30.00 | Watering Distributing Pipe (system) | | | |
| 2. Mobile Home Park Site* | \$ 5.00 | | | 14. ¾" Water Distribution Pipe | \$5.00 | | |
| 3. Fixtures, floor drains, special drains, water connected appliances | \$5.00 each | | | 15. 1" Water Distribution Pipe | \$10.00 | | |
| <input type="checkbox"/> 25. Domestic water treatment and filtering equipment only** | | | | 16. 1 ¼" Water Distribution Pipe | \$15.00 | | |
| 4. Stacks (soil, waste, vent and conductor). | \$3.00 each | | | 17. 1 ½" Water Distribution Pipe | \$20.00 | | |
| 5. Sewage ejectors, sumps. | \$5.00 each | | | 18. 2" Water Distribution Pipe | \$25.00 | | |
| 6. Sub-soil drains | \$5.00 each | | | 19. Over 2" Water Distribution Pipe | \$30.00 | | |
| Water Service | | | | 20. Reduced pressure zone back-flow preventer | \$ 5.00 each | | |
| 7. Less than 2" | \$5.00 | | | 21. Special/Safety Insp. (includes cert. fee) <input type="checkbox"/> 26. Medical Gas System*** | \$45.00 | | |
| 8. 2" to 6" | \$25.00 | | | Inspections | | | |
| 9. Over 6" | \$50.00 | | | 22. Underground | \$30.00 | | |
| 10. Connection bldg. drain – bldg. sewers | \$5.00 | | | 23. Rough-In (each) | \$30.00 | | |
| Sewers (sanitary, storm, or combined) | | | | 24. Additional Inspection | \$30.00 | | |
| 11. Less than 6" | \$5.00 | | | 27. Final Inspection | \$30.00 | | |
| 12. 6" & Over | \$25.00 | | | 28. Certification Fee | \$10.00 | | |
| 13. Manholes, Catch Basins | \$ 5.00 each | | | Total Fee (must include \$30.00 non-refundable administrative fee). Please make checks Payable to Gaines Charter Township | | | |
| * See VIIa. FEE CLARIFICATION, Item #2 | | | | | | | |
| **See VIIb. FEE CLARIFICATION, Item #25 above | | | | | | | |
| ***See VIIb. FEE CLARIFICATION, Item #26 above | | | | | | | |

IX. Instructions for Completing Application

General: Plumbing work shall not be started until the application for permit has been filed with Gaines Charter Township. 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 BE REINSTATED.**

The Department 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.