



# Plumbing Permit Application

8555 Kalamazoo Avenue SE  
Caledonia MI 49316

Phone: 616 698-6640 Fax: 616 698-2490  
Plumbing Inspections • 616 438-9076

[www.gainestownship.org](http://www.gainestownship.org)

Application Date:

Authority: 1972 PA 230  
Completion: Mandatory to obtain permit  
Penalty: Permit cannot be issued

<b>Job Location</b>		<b>Gaines Charter Township, Kent County Michigan</b>	
Name of Owner / Agent:		Phone:	Has a Building Permit been obtained for this project? Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required <input type="checkbox"/>
Location of Project:	Street Address	City	
<b>Contractor / Homeowner Information:</b>			
<input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner <input type="checkbox"/> Water Treatment Installer	Business Name:		
	Contact Name:		
Address:	Street No. and Name City, State, Zip		
Phone / E-Mail	Office:	Cell:	E-Mail:
License Info:	Contractor License Number	Expiration Date:	Federal Employer ID Number
	Master License Number	Expiration Date:	Master Name:
	Workers Compensation Insurance Carrier (or reason for exemption)		
<b>Type of Job</b> (Description of work to be completed. This section <b>must</b> be completed.)			
<input type="checkbox"/> Single Family <input type="checkbox"/> Other	<input type="checkbox"/> New <input type="checkbox"/> Alteration	<input type="checkbox"/> Sewer Only <input type="checkbox"/> Water Only <input type="checkbox"/> Special Insp.	<input type="checkbox"/> Pre-manufactured Home Setup (State Approved) <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home)
<b>Plan Review Required</b>			
Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, <b>except:</b>			
<b>Plans are not required for:</b>			
1. One and two family dwelling(s) containing not more than 3,500 sq ft 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 twelve. 4. Work completed by a governmental subdivision or State agency costing less than \$15,000. 5. Check box if any of the above statements pertain: <input type="checkbox"/> Plans Not Required			
<b>Plans are required for:</b> 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 Number:			
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.			
<b>Homeowner Affidavit</b>			
I hereby certify the plumbing work described on this permit application shall be installed <b>by myself in my own home</b> in which I am living or about to occupy. All work shall be installed in accordance with the Michigan Plumbing Code and <b>shall not be enclosed, covered up or put into operation until it has been inspected and approved</b> by the Gaines Charter Township (GCT) Plumbing Inspector. I will cooperate with the GCT Plumbing Inspector and assume the responsibility to arrange for necessary inspections.			
<b>Signature of Plumbing Contractor, Master Plumber, Water Treatment Installer or Homeowner</b> (Homeowner signature indicates compliance with Homeowner Affidavit above.)			<b>Date:</b>

Fee Schedule							
Description	Fee	# of Items	Total	Description	Fee	# of Items	Total
1. Administration Fee (Non-refundable and <b>does not include an inspection.</b> )	\$40	1	\$40	<b>Watering Distributing Pipe (System)</b>			
2. Mobile Home Park Site *	\$5			15. ¾ inch	\$5		
3. Fixtures, floor drains, special drains, water connected appliances (see list below)	\$5 ea			16. 1 inch	\$10		
4. Domestic water treatment and filtering equipment only **	\$5			17. 1 ¼ inch	\$15		
5. Stacks (soil, waste, vent and conductor).	\$3 ea			18. 1 ½ inch	\$20		
6. Sewage ejectors, sumps	\$5 ea			19. 2 inch	\$25		
7. Sub-soil drains	\$5 ea			20. Over 2 inches	\$30		
				21. Reduced pressure zone back-flow preventer	\$5 ea		
<b>WATER SERVICE</b>				22. Medical Gas System ***	\$45		
8. Less than 2 inches	\$5						
9. 2 inches to 6 inches	\$25			<b>INSPECTIONS</b>			
10. Over 6 inches	\$50			23. Special / Safety	\$45		
11. Connection building drain – building sewers	\$5			24. Underground	\$40		
				25. Rough-In (each)	\$40		
<b>SEWERS (Sanitary, Storm or Combined)</b>				26. Storm	\$40		
12. Less than 6 inches	\$5			27. Additional	\$40		
13. 6 inches and over	\$25			28. Final	\$40		
14. Manholes, Catch Basins	\$5 ea						
<b>Grand Total</b>							
<i>Total fee must include the \$40 non-refundable Administration Fee. Make checks payable to Gaines Charter Township.</i>							
<b>*Item # 2 – Mobile Home Park Site:</b>							
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.							
<b>** Domestic Water Treatment and filtering equipment:</b> 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 #3 for \$5 each and the appropriate water distribution pipe (system) size fee.							
<b>*** Medical Gas Systems</b> shall include the administrative fee one Special / Safety Inspection – Medical Gas System # 22 (see item #22-23) and the estimated number of additional inspection in #26.							
<b>Fixtures, Floor Drains, Special Drains, Water Connected Appliances</b>							
Acid Waste Drain	Cuspidor	Garbage Grinder	Roof Drain	Water Closets	Water Heater		
Autopsy	Dishwasher	Grease Trap	Shower Stall	Water Connected:	Water Outlet Cooler		
Bathtub	Drinking Fountain	Ice Making Mach	Sink (any)	Dental Chair	Water Outlet or Connection:		
Bed Pan Washer	Embalming Table	Laundry Tray	Slop Sink	Sterilizer	Make-up Water Tank		
Bidet	Emergency Eye Wash	Lavatories	Starch Trap	Still	Filters		
Condensate Drain	Emergency Shower	Plaster Trap	Urinal		Heating System		
Connection to Sprinkler System (Irrigation)	Floor Drain	Refrigerator	Washing Machine	Water Connection to Carbonated Beverage Dispensers	Water Softener		
Plus any other fixture, drain or water connected appliance not specifically listed.							

**General:** Plumbing work shall not be started until the application for the permit has been filed with Gaines Charter Township. All installations shall be in conformance with the 2015 Michigan Plumbing Code. **No work shall be concealed until it has been inspected.** The telephone number for the inspector is **616 438-9076**. 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 the permit has been issued 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.**