

Plumbing Permit Application Swan Creek Township 11415 Lakefield Rd P.O. Box 176 St.Charles MI 48655-0176

P 2015 P

Authority: 1972 PA 230 Completion: Mandatory to ob Penalty: Permit can not b										
I. Project or Facility In	formation	***************************************								
NAME OF OWNER/AGENT/S		EPT.			HAS A BUILDIN	G PERMIT BEEN OBTAINE	D FOR THIS PROJECT?			
İ					☐ Yes	□ No	☐ Not required			
STREET ADDRESS AND JOB	R I OCATION (Street	et Number and	(Name)		1 103	140	COUNTY			
STREET ADDRESS AND JOB	LOCATION (Sie	A NUMBER AND	(value)							
II. Applicant/Facility Co	ontact Inform	ation								
INDICATE WHO THE APPLIC	ANT IS		NAME OF API	PLICANT		CONTRACTOR LICENS	SE NUMBER EXPIRATION DATE			
☐ Contractor ☐ Ho										
	ater Treatment	Installer	<u> </u>							
ADDRESS (Street Number and	d Name)			CITY	STATE ZIP CODE					
TELEPHONE NUMBER (Inclu	de Area Code)				FEDERAL EMPLOYER ID	NUMBER (or reason for ex	emption)			
	I NOUGANIOE OAF	20/50 /		>	UIA NUMBER (or reason for exemption)					
WORKERS COMPENSATION	I INSURANCE CAP	KRIER (or reas	son for exemption	OIA NUMBER (or reason)	or exemption)					
NAME OF MASTER PLUMBE	R					MASTER LICENSE NUM	MBER EXPIRATION DATE			
BUSINESS / BRANCH ADDRE				CITY		STATE	ZIP CODE			
BUSINESS / BRANCH ADDING	_00			6111		SIAIE				
III. Type of Job										
		T			r-1					
Single Family New Sewer Only Water Service					☐ Premanufactured	f Home Setup (State)	Approved)			
	Only Special Inspection				Manufactured Ho	ome Setup (HUD Mob	nile Home)			
Other '	Alteration	L Specia	at mapecion	I	La Manufactureo Fic	The Setup (110D Mor	one Home)			
IV. Plan Review Inform										
Plans must be submi below.	itted with an	Applicatio	on for Plan	Examination and the	appropriate deposit	before a permit ca	in be issued, except as listed			
Plans are not required	d for the follow	/ina:								
			ot more than	3,500 square feet of bu	ilding area.					
				ng official to be of a mine						
Buildings with a re										
				te agency costing less t						
If work being performed	d is described	above, che	ck box belo	w "Plans Not Required.	,					
Plans are required for 299 and shall bear that					e direct supervision of	an architect or engine	eer licensed pursuant to 1980 PA			
BCC Plan Review Project No. Plans Not Required										
V. Applicant Signature					3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
	to constructio	on codo ac	ct of 1972 1	1972 PA 230 MCI 125	1523A prohibits a ne	erson from conspirir	ng to circumvent the licensing			
requirements of this s	te construction	to persons	s who are t	o perform work on a r	esidential building o	r a residential struc	ture. Violators of Section 23a			
are subjected to civil		то рогоот		- - - - - - - - - -						
SIGNATURE OF PLUMBING C		ASTER PLUME	BER, WATER TI	REATMENT INSTALLER OR H	OMEOWNER (Homeowner's	signature indicates DAT	TE .			
compliance with Section VI. Ho					·					
VI. Homeowner Affidav										
All work shall be instal	lled in accorda	ance with t	the Michiga	n Plumbing Code and	shall not be enclose	ed, covered up, or	n I am living or about to occupy. put into operation until it has			
been inspected and a inspections.	approved by	the Code	Official.	will cooperate with the	e Code Official and a	issume the responsi	bility to arrange for necessary			

Complete Application on Back Side

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, the number of unit sites and a final inspection. 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, a water service or water distribution pipe and a final inspection.

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 Water Outlet or Connection to Heating System Condensate Drain Roof Drain Bathtub Emergency Eye Wash Bidet Water Outlet or Connection to Filters Lavatories **Emergency Shower** Cuspidor Washing Machine Grease Trap Acid Waste Drain Starch Trap Connection to Sprinkler System (Irrigation) Shower Stall Garbage Grinder Dishwasher Plaster Trap Water Connected Sterilizer Laundry Tray Water Outlet Cooler Refrigerator **Embalming Table** Bed Pan Washer Ice Making Machine Water Softener Water Connected Dental Chair Urinal Sand Trap Water Connection to Carbonated Beverage Dispensers Autopsy Water Connected Still Oil Separator 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 and the appropriate water distribution pipe (system) size fee.

	Fee	# Items	Total		Fee	# Items	Total
1. Application Fee (non-refundable)	\$25.00	1	\$25.00	Water Distributing Pipe (system)			
2. Mobile Home Park Site*	\$5.00 each			14, 3/4" Water Distribution Pipe	\$5.00		
Fixtures, floor drains, special drains, water connected appliances	\$5.00 each			15. 1" Water Distribution Pipe	\$10.00		
4. Stacks (soil, waste, vent and conductor)	\$3.00 each			16. 1-1/4" Water Distribution Pipe	\$15.00		
5. Sewage ejectors, sumps	\$5.00 each			17. 1-1/2" Water Distribution Pipe	\$20.00		
6. Sub-soil drains	\$5.00 each			18, 2" Water Distribution Pipe	\$25.00		
Water Service				19. Over 2" Water Distribution Pipe	\$30.00		
7. Less than 2"	\$5.00			20. Reduced pressure zone back-flow preventer	\$5.00 each		
8. 2" to 6"	\$25.00			25. Domestic water treatment and filtering equipment only**	\$5.00 each		
9. Over 6"	\$50.00			26. Medical Gas System	\$45.00		
10.0	65.00			27. Water Heater	\$5.00		
10. Connection (bldg. drain-bldg. sewers)	\$5.00			Inspections			
Sewers (sanitary, storm or combined)				21. Special Insp. (pertaining to sale of building)	\$50.00		
11. Less than 6"	\$5.00			22. Additional Inspection	\$50.00		
12. 6" and Over	\$25.00			23. Final Inspection	\$50.00	1	\$50.00
13. Manholes, Catch Basins	\$5.00 each			24. Certification Fee	\$30.00		

^{*}See VII. Fee Schedule Item #2, #3 and #25 above

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 \$25 non-refundable application fee and \$50 final inspection fees.)

Make checks payable to "Swan Creek Township"

VIII. Instructions for Completing Application

General: Plumbing work shall not be started until the application for permit has been filed with Swan creek 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 CODE OFFICIAL: SCOTT STEINKE and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 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 INSPECTION PERMIT IS \$75.00.

PHONE: 989-781-6973

CALL AT LEAST 48 HOURS PRIOR TO REQUIRED