INGERSOLL TOWNSHIP

PLUMBING PERMIT APPLICATION

Rev. 3/3/2023

| I. JOB LOCATION | | | | | | | |
|---|--|---|-----------------|-----------------------|--|--|--|
| Name of Owner/Agent | Phone: | 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 | | | | |
| | | | | | | | |
| I. CONTRACTOR/HOMEOWNER INFORM | IATION | T . | 1 | | | | |
| Contractor Homeowner Name | | License Numbe | er | Expiration Date | | | |
| Street Address (Street No. and Name) | | City/Village | Township | County | | | |
| Telephone Number | | Federal Eamployer | ID Number (or | reason for exemption) | | | |
| Workers Compensation Insurance Carrier (or reason for | MESC Employer Number or reason for exemption) | | | | | | |
| | | | | | | | |
| III. TYPE OF JOB Single Family Other New | | Dramanufactur | and Haman Catum | (State Approved) | | | |
| | Sewer Only Water Service Only Special Inspection | | | UD Mobile Home) | | | |
| IF OTHER/ALTERATION, PLEASE EXPLAIN: | State Owned School | | | | | | |
| I. | | | | | | | |
| IV. PLAN REVIEW REQUIRED | | | | | | | |
| Have plans been submitted? (See below for plan review | requirements before completing this section. | | | | | | |
| YES □ NO □ NOT REQUIRED □ | | | | | | | |
| Plans are not required for the following: | | | | 1. One | | | |
| and two-family dwellings containing not more than 3,500 square feet of building area. 2. Alterations and repair w | | | | | | | |
| determined by the plumbing official to be of a minor nature. 3. Assembly, Business, Mercantile, and Storage | | | | | | | |
| Buildings with a required plumbing fixture count less than 12. 4. Work completed by a governmental subdivision or state agency cos | | | | | | | |
| less than \$15,000.00. | If work being performed is descrive | | | | | | |
| | be prepared by or under the direct supervision of an archi | • | | | | | |
| of 1980, as amended, and shall bear that architect's or engineer's signature and seal. PLANS MUST BE SUBMITTED BEFORE A PERMIT CAN BE ISSUED. | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| V. HOMEOWNER AFFIDAVIT | | | | | | | |
| I hereby certify the Plumbing work described | on this permit application shall be installed by | myself in my own ho | ome in which | I am living or about | | | |
| | dance with the Plumbing Code and shall not be | | | - | | | |
| has been Inspected and approved by the Plumbing Inspector. I will cooperate with the Plumbing Inspector and assume the responsibility to | | | | | | | |
| arrange for necessary inspections. | 5 - 1 | 6 | | ., | | | |
| | | | | | | | |
| VI. 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 subject to civil fines. | | | | | | | |
| Signature of Licensee or Homeowner (Homeowner's signature) | nature indicates compliance with Section V Homeowner A | ffidavit.) | | Date | | | |
| | | | | | | | |

COMPLETE APPICATION ON BACK SIDE

VIIa. FEE CLARIFICATION

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 modular home on a private property, a permit should include the application fee, a sewer or building drain, and a water service or water distrubuting pipe.

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VII.b FEE CLARIFICATION (continued)

FIXTURES, FLOOR DRAINS, SPECIAL DRAINS, & WATER CONNECTED APPLIANCES INCLUDE: Sink (anydescription) Slop Sink Drinking Fountain Water Closets Floor [Shower Stall Bathtub Emergency Eye Wash Bidet Condensate Drain Roof D Laundry Tray Lavatories Emergency Shower Cuspidor Washing Machine Grease Urinal Dishwasher Refrigerat Acid Waste Drain Starch Water Softner Garbage Grinder Water Outlet Cooler Autopsy Embalming Table Plaster Bad Pan Washer

 Ice Making Machine
 Water Connected Dental Chair
 Water Connection to Carbonated Beverage Dispenser

 Water Connected Still
 Water Connection to Filters
 Water Outlet or Connection to any Make-up Water Tank

 Connection to Sprinkler System (Irrigation)
 Water Outlet or Connection to Heating System

Connection to Sprinkler System (Irrigation) Water connected Sterilizer

PLUS ANY OTHER FIXTURE, DRAIN, OR WATER CONNECTED APPLIANCE NOT SPECIFICALLY LISTED

VIII. FEE CHART - Enter the number of items being installed, multiply by the unit price for total fee.

| DESCRIPTION | FEE | # | TOTAL | DESCRIPTION | FEE | # | TOTAL |
|-----------------------------------|----------|---|-------|-------------------------------------|----------|---|---------|
| Application Fee (No Refund) | \$50.00 | 1 | 50.00 | Water Heater | 5.00 ea | | |
| Mobile Home Park Sites* | 5.00 ea | | | Water Distributing Pipie (system | 1) | | |
| Fixtures, floor drains, special | | | | 3/4" Water Distributing Pipe | \$ 5.00 | | |
| drains, water connected app. | 4.00 ea | | | 1" Water Distributing Pipe | \$ 10.00 | | |
| Stacks soil waste, vent & conduct | 3.00 ea | | | 1-1/4" Water Distributing Pipe | \$ 15.00 | | |
| Sewage ejectors, sumps | 5.00 ea | | | 1-1/2" Water Distributing Pipe | \$ 20.00 | | |
| Sub-soil drains | 5.00 ea | | | 2" Water Distributing Pipe | \$ 25.00 | | |
| Water Service: Less than 2" | 5.00 ea | | | Over 2" Water Distributing Pipe | \$ 30.00 | | |
| 2" to 6" | \$ 20.00 | | | Reduced pressure zone back-flo | w | | |
| Over 6" | \$ 40.00 | | | Preventer / Vacuum Breaker | 5.00 ea | | |
| Connection bldg/drain/sewers | \$ 5.00 | | | Safety/Special Insp -incl. Cert. Fe | \$ 45.00 | | |
| Sewers sanitary, storm or combin | ied | | | Additional Inspection | \$ 30.00 | | |
| Less than 6" | \$ 5.00 | | | Final Inspection | \$ 50.00 | 1 | \$50.00 |
| 6" and over | \$ 20.00 | | | Certification Fee | \$ 10.00 | | |

| TOTAL | |
|-------|--|
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IX. INSTRUCTIONS FOR COMPLETING APPLICATION

GENERAL: Plumbing work shall not be started until the application for permit has been filed. All installations shall be inconformance with the Plumbing Code. **No work shall be concealed until it has been inspected.**When ready for inspection, call the inspector pproviding as much advance notice as possible. The Inspector will need the hob 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 REFUNDED OR REINSTATED.

The Township will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

Make Checks payable to:Ingersoll TownshipMail Permits to:Greg Younk2251 N. 8 Mile

Sanford, MI 48657