

Permit #PP

Plumbing Permit Application

Tyrone Township
28 E Muskegon St Box 275
Kent City, MI 49330

www.tyronetownship.org

Plumbing Inspector: Dave Cooley (616) 447-0878

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

I. Job Location

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

II. Contractor/Homeowner Information

INDICATE WHO THE APPLICANT IS <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner <input type="checkbox"/> Master <input type="checkbox"/> Water Treatment Installer	NAME OF PLUMBING CONTRACTOR OR HOMEOWNER	CONTRACTOR LICENSE NUMBER	EXPIRATION DATE
ADDRESS (Street No. and Name)	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)	MESC EMPLOYER NUMBER (or reason for exemption)		
NAME OF MASTER PLUMBER	MASTER LICENSE NUMBER	EXPIRATION DATE	
BUSINESS/BRANCH 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 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 Required

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. 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

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 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 State Plumbing Inspector. I will cooperate with the State 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 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 or building drain, and a water service or water distribution pipe.

VIIb. Fee Clarification (continued)

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
Bathub	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	Embalmng 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 application fee, the number of water treatment devices recorded in item #25 for \$5.00 each, and the appropriate water distribution pipe (system) size fee.					

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

	FEE	# ITEMS	TOTAL		FEE	# ITEMS	TOTAL
1. Application Fee (non-refundable)	\$50.00	1	\$50.00	Watering Distributing Pipe (system)			
2. Mobile Home Park Site *	\$5.00 each			14. 3/4" Water Distribution Pipe	\$ 5.00		
3. 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		
9. Over 6"	\$50.00			26. Medical Gas System	\$45.00		
10. Connection (bldg. drain - bldg. sewers)	\$ 5.00			Inspections			
Sewers (sanitary, storm, or combined)				21. Special/Safety Insp. (includes cert. fee)	\$50.00		
11. Less than 6"	\$ 5.00			22. Additional Inspection	\$50.00		
12. 6" & Over	\$25.00			23. Final Inspection	\$50.00		
13. Manholes, Catch Basins	\$5.00 each			24. Certification Fee	\$20.00		

* See VIIa. Fee Clarification, Item #2 on front

** See VIIb. Fee Clarification, Item #25 above

Total Fee (Must include the \$50.00 non-refundable application fee)

--

**Make checks payable to:
Tyrone Township**

IX. 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 & Fire Safety. 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 REINSTATED.**

Where to Submit Application:

Tyrone Township Building Dept (Phone 616-678-4779)
28 E Muskegon St – Box 275 Fax: 616-678-5513
Kent City, MI 49330

VALIDATION AREA

Tyrone Township 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.

**TYRONE TOWNSHIP
TO ALL CONTRACTORS WORKING IN TYRONE TOWNSHIP**

All contractors are required to register their new license each year. This registration form should be read, signed and returned. This contractor is aware of the following Tyrone Township requirements:

1. A copy of the contractor's license must accompany this registration.
2. Only registered licensed contractors can obtain permits.
3. Permit is required prior to commencement of work.
4. Proper street address obtained from Kent County Road Commission must be on all permits and be used when requesting inspections.
5. Permit is valid only when received and accepted by inspection personnel.
6. No work shall be covered or concealed without inspection and approval.
7. Each contractor is responsible for arranging his own inspections.
8. Final inspections and Certificate of Occupancy is required for all projects before occupancy occurs.
9. Homeowners can obtain a Homeowner Permit for a single-family dwelling in which he lives or is about to occupy for not less than one (1) year.
10. This registration may be revoked by Tyrone Township if at any time code or ordinance violations are not corrected within 30 days.

License Holder's Signature _____ Date _____

Contractor's Business Name _____

License Holder's Name _____

Business Address _____

Business Phone # _____ Fax# _____

Mobile Phone # _____

Contractor's License # _____ License Expires _____

Contractor's License Issued by _____

Contact Person's Name _____ Phone # _____

Workman's Comp carrier _____ Policy # _____

Issue Date _____ Expiration Date _____

Liability Insurance carrier _____ Policy # _____

Issue Date _____ Expiration Date _____

Federal ID # _____ MESC # _____

PLEASE REMIT \$3.00 FEE: Tyrone Township
28 E Muskegon St. PO Box 275
Kent City, MI 49330