



414 E. MAIN STREET
 DEWITT, MICHIGAN 48820
 PHONE: (517) 669-2441
 FAX: (517) 669-8211
 INSPECTION LINE: (517) 668-0278
www.dewittmi.org

DATE: _____

THIS APPLICATION IS FOR:

 (PRINT NAME OF OWNER)

 (JOB SITE - STREET ADDRESS)

 (CITY, STATE AND ZIP CODE)

1. Property Owner's Ph. (____) _____

HOMEOWNER'S AFFIDAVIT:

"Section 23a of the state construction code act of 1972, Act No. 230 of the Public Acts of 1972, being section 125.1523a of the Michigan Compiled Laws, 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."

I hereby certify the work described on this application shall be installed by me in my own single family dwelling in which I am living or about to occupy.

 (HOMEOWNER SIGNATURE) (DATE)

STATE LAW ACT 53 REQUIRES YOU TO CALL MISS DIG
 72 HOURS BEFORE YOU DIG
 1-800-482-7171

PLUMBING PERMIT APPLICATION

Plumbing Permit No. _____ Building Permit No. _____

TYPE OF EQUIPMENT:	PER UNIT	NO.	FEE
Application Fee (non-refundable)	10.00	1	10.00
Base Permit Fee: (includes one (1) inspection)	65.00 ea.		
Fixtures, Water Connected Appl., Drains, Mobile Home Sites: <input type="checkbox"/> Water Closets <input type="checkbox"/> Slop Sinks <input type="checkbox"/> Bathtubs <input type="checkbox"/> Bidet <input type="checkbox"/> Lavatories <input type="checkbox"/> Cuspidor <input type="checkbox"/> Shower Stalls <input type="checkbox"/> Emergency Eye-wash <input type="checkbox"/> Sink - (any type) <input type="checkbox"/> Emergency Shower <input type="checkbox"/> Laundry Tray <input type="checkbox"/> Garbage Grinder <input type="checkbox"/> Drinking fountain <input type="checkbox"/> Urinal <input type="checkbox"/> Dishwasher <input type="checkbox"/> Water Softener <input type="checkbox"/> Refrigerator <input type="checkbox"/> Water Outlet Cooler <input type="checkbox"/> Water Heater <input type="checkbox"/> Ice Making Machine <input type="checkbox"/> Acid Waste Drain <input type="checkbox"/> Grease Trap <input type="checkbox"/> Condensate Drain <input type="checkbox"/> Starch Trap <input type="checkbox"/> Floor Drain <input type="checkbox"/> Plaster Trap <input type="checkbox"/> Roof Drain <input type="checkbox"/> Others not listed <input type="checkbox"/> Other water supplied device not specifically listed <input type="checkbox"/> Connection to a Fire Sprinkler or Irrigation System: <input type="checkbox"/> Water Outlet Connection to a Heating System or a Make-up Water Tank or Filter:	6.00 ea.		
Stacks: (soil, waste, vent and conductor)	3.00 ea.		
Sanitary Sewer: (connection at the building)	6.00 ea.		
Water Service:	6.00 ea.		
Sub-Soil Drains:	6.00 ea.		
Sewage Ejectors, Manholes, Sumps:	6.00 ea.		
Water Distribution Pipe : <input type="checkbox"/> 3/4" - \$5.00 <input type="checkbox"/> 1" - \$10.00 <input type="checkbox"/> 1-1/4" - \$15.00 <input type="checkbox"/> 1-1/2" - \$20.00 <input type="checkbox"/> 2" - \$25.00 <input type="checkbox"/> Over 2" - \$30.00			
Reduced Pressure Zone Back-flow Preventer: (up to & including 1")	6.00 ea.		
Natural Gas Piping: (connection)	6.00 ea.		
Special Inspections: (minimum 1 hour)	50.00/hr.		
Additional, Final & Re-inspections:	50.00 ea.		
Special Letter of Approval:	10.00 ea.		
TOTAL			

DESCRIPTION OF WORK:

CONTRACTOR:		OFFICE NO.:	
CELL NO.:		FAX NO.:	
ADDRESS:	CITY:	STATE:	ZIP CODE:
EMAIL:	STATE LICENSE NO.:	EXP. DATE:	
FEDERAL ID NO. OR REASON FOR EXEMPTION (DO NOT USE S.S.#):			
WORKERS COMP INS. CARRIER OR REASON FOR EXEMPTION:			
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION:			
CONTRACTOR'S SIGNATURE:			