



**PLUMBING PERMIT APPLICATION - GRAND BLANC TOWNSHIP**      **Effective March 4th, 2013**  
**GRAND BLANC TOWNSHIP, Building Department, PO Box 1833, Grand Blanc, MI 48480**  
**INSPECTIONS VOICE MAIL SYSTEM: (810) 424-2690    INSPECTIONS HELP: (810) 424-2782    PERMITS HELP: (810) 424-2782**

**APPLICANT IS:**                      **CONTRACTOR** \_\_\_\_\_                      **HOMEOWNER** \_\_\_\_\_

<b>I. JOB LOCATION</b>			
JOB LOCATION (STREET NO. AND NAME)	CITY:    FLINT / GRAND BLANC / HOLLY	SUBDIVISION	LOT NO.
OWNER'S NAME	TOWNSHIP GR BLANC	COUNTY GENESEEE	HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT?

<b>II. APPLICANT INFORMATION</b>			
NAME		AUTHORITY:    P.A.230 OF 1972, AS AMENDED	
ADDRESS (STREET NO. AND NAME)		COMPLETION:    MANDATORY TO OBTAIN PERMIT	
CITY		STATE	ZIP CODE
SOCIAL SECURITY NUMBER or FEDERAL ID NO. (OR REASON FOR EXEMPTION)		TELEPHONE NUMBER	PENALTY:    PERMIT CANNOT BE ISSUED
WORKERS COMPENSATION INSURANCE CARRIER (OR REASON FOR EXEMPTION)		MESC EMPLYR NO. (OR REASON FOR EXEMPTION)	
		State License No.	Expiration Date
		State Registration No.	Local License Jurisdiction
		Local License Number	Expiration Date

<b>III. TYPE OF JOB</b>					
<input type="checkbox"/> Single Family	<input type="checkbox"/> New	<input type="checkbox"/> Sewer	<input type="checkbox"/> Special Insp	<input type="checkbox"/> Premanufact Home Set (State Approved)	<input type="checkbox"/> State Owned
<input type="checkbox"/> Other	<input type="checkbox"/> Alteration	<input type="checkbox"/> Water		<input type="checkbox"/> Manufactured Home Set (HUD Mobile Home)	<input type="checkbox"/> School
What is Size of Building (sq ft)?	Air Conditioning Included?		Occupant Load (Commercial/Industrial Uses)		

<b>IV. PLAN REVIEW REQUIRED</b>		
<b>HAVE PLANS BEEN SUBMITTED?</b> (see below for plan review requirements before completing this section)      Yes _____ No _____ Not Required _____		
<b>Plans are not required</b> for the following:		
1. One- & two-family dwelling containing not more than 3,500 sq ft of building area.	2. Alterations, repair work determined to be of a minor nature by plmb official.	
3. Assembly, Business, Mercantile, & Storage Bldgs with a req'd plumbing fixt count < 12.	4. Work completed by a gov subdivision or state agency costing < \$15,000.	
<b>If work being performed is described above, answer Section IV. "Not Required."</b>		
<b>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 Act No. 299 of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal.</b>		
<b>REQUIRED PLANS MUST BE SUBMITTED BEFORE A PERMIT CAN BE ISSUED</b>		

<b>V. APPLICANT SIGNATURE</b>	
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.	
<b>X</b>	DATE
SIGNATURE OF LICENSEE OR HOMEOWNER (HOMEOWNER SIGNATURE INDICATES COMPLIANCE WITH SECTION VI. HOMEOWNER AFFIDAVIT)	

<b>VI. HOMEOWNER AFFIDAVIT</b>
I hereby certify the plumbing work described on this permit application <b>shall be installed 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 Plumbing Code and <b>shall not be enclosed, covered up or put into operation until it has been inspected and approved by the Plumbing Inspector.</b> I will cooperate with the Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

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**VII. FEE CLARIFICATIONS**

For New Houses items #1, #2, #24 and #25 are required. All inspections are separate fees. Include required detail in "Complete Description of Work" Section

Item #3 Water Heater is a flat rate of \$125.00-No Application fee is needed

The application fee is NON-REFUNDABLE and DOES NOT include any inspections

**ITEM #3, 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 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 distribution pipe.

**REQUIRED: ITEM #4, FIXTURES, FLOOR DRAINS, SPECIAL DRAINS, & WATER CONNECTED APPLIANCES INCLUDE:**

Wtr Closets	Sink (any description)	Slop Sink	Drinking Fountain	Floor Drain	Water outlet/Connection to any Make-up WTr Tank
Bathtub	Emergency Eye Wash	Bidet	Condensate Drain	Roof Drain	Water Outlet/Connection to Heating system
Lavatories	Emergency Shower	Cuspidor	Washing Machine	Grease Trap	Water Outlet/Connection to Filters
Shower Stall	Garbage Grinder	Dishwasher	Acid Waste Drain	Starch Trap	Connection to Sprinkler System (irrigation)
Laundry Try	Water Outlet Cooler	Refrigerator	Embalming Table	Plaster Trap	Water Connected Sterilizer
Urinal	Ice Making Machine	Water Htr	Bed Pan Washer	Wtr Softener	Water Connected Dental Chair
Autopsy	Water Connected Still				Water Connection to Carbonated Bev Dispensers

<b>NEW PERMIT</b>		<b>TO ADD TO EXISTING PERMIT (ADDT'L INSP FEE MAY BE REQUIRED)</b>	
<b>COMPLETE DESCRIPTION OF WORK TO BE COMPLETED UNDER THIS PERMIT</b>		<b>EXISTING PERMIT #</b>	
		<b>COMPLETE DESCRIPTION OF ADDITIONAL WORK</b>	

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

	FEE	# ITEMS	TOTAL		FEE	# ITEMS	TOTAL
1. Application Fee	\$ 75.00	1	\$ 75.00	13. Sewers 6" & Over perf 100 lf (sanitary/storm)	\$ 30.00		
2. New Res Plumbing System up to 1,500 sf	\$ 85.00			14. Manholes, Catch Basins (ea)	\$ 6.00		
New Res Plumbing system -1,501 - 3,500 sf	\$ 135.00			15. Water Dist Pipe (syst) 3/4" Wtr Dist Pipe	\$ 6.00		
New Res Plumbing System - 3,501 - 7,000 sf	\$ 185.00			16. Water Dist Pipe (syst) 1" Wtr Dist Pipe	\$ 11.00		
New Res Plumbing System - 7,001 sf & over	\$185.00 + \$25.00/1,000			17. Water Dist Pipe (syst) 1 1/4" Wtr Dist Pipe	\$ 16.00		
3. Water Heater	\$125.00			18. Water Dist Pipe (syst) 1 1/2" Wtr Dist Pipe	\$ 21.00		
4. Fixt, flr drains, spec drains, wtr conn appl (ea)	\$ 6.00			19. Water Dist Pipe (syst) 2" Wtr Dist Pipe	\$ 26.00		
5. Stacks (soil, waste, vent or conductor (ea)	\$ 3.00			20. Water Dist Pipe (syst) Over 2" Wtr Dist Pipe	\$ 31.00		
6. Sewage ejectors, sumps (ea)	\$ 6.00			21. Red press zone back-flow preventer (ea)	\$ 6.00		
7. Sub-soil drains (ea)	\$ 6.00			22. Medical gas (per connection / min = \$50.00)	\$55.00 + \$5.00 ea		
8. Water service - Less than 2"	\$ 6.00			23. Special/Safety Inspection (includes Cert Ltr)	\$ 80.00		
9. Water service - 2" - 6"	\$ 30.00			24. Additional Inspection	\$ 80.00		
10. Water Service - over 6"	\$ 55.00			25. Final Inspection	\$ 80.00		
11. Connection - building drain-building sewers	\$ 6.00			26. Certification Fee	\$ 25.00		
12. Sewers Less than 6" per 100 lf (sanitary/storm)	\$ 6.00			27. Mobile Home Park Site* (each)	\$ 6.00		
<b>REQUIRED INSPECTIONS: Underground Rough Above Ceiling Final Other:</b>				<b>TOTAL FEES</b>			

**IX. INSTRUCTIONS FOR COMPLETING APPLICATION**

<b>GENERAL:</b> Any regulated activity started prior to the applicant securing the permit, will be charged an additional administrative charge at the same rate as the required permit fee not to exceed \$100.00. This shall be paid prior to the issuance of the required permit.	<b>PERMIT EXPIRATION:</b> A permit remains valid provided work is progressing & inspections are requested & conducted. A permit shall become invalid if the authorized work is not commenced within 6 months after issuance or if work is suspended or abandoned for a period of six months after the time of commencement. A pmt will be cancelled when no inspections are requested/conducted within six months of the date of issuance or the date of a previous inspection. Cancelled pmts cannot be refunded or reinstated.	The Department will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.
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DEPARTMENT APPROVAL:

DATE: