

Oshtemo Township Building Department 7275 W Main St, Kalamazoo, MI 49009 Phone: (269) 585-4150

Email: building@oshtemo.org

## **PLUMBING PERMIT APPLICATION**

| Office Use Only:                            |                               |           |   |  |           |             | Authority: 1972 PA 230                |
|---|-------------------------------|-----------|---|--|-----------|-------------|---------------------------------------|
| Affix permit / parcel number barcod         | e.                            |           |   | Cor  | mpletion  | : Mano      | datory to Obtain Permit               |
| Downsit Newsland                            |                               |           | Applica   | tion must k  | e compl   | eted, s     | signed, and all fees paid             |
| Permit Number:                              |                               | р         | rior to pe  | rmit issuan  | ce. Wor   | k com       | oleted without a permit               |
|   |                               |           |   |  | is il     | legal a     | nd subject to civil fines.            |
|   |                               |           |   |  |           |             |                                       |
| 1. Job Location / Owner Info                | rmation                       |           |   |  |           |             |                                       |
| Street Address:                             |                               |           |   |  |           |             |                                       |
| Name of Owner:                              |                               |           |   |  |           |             |                                       |
|   |                               |           |   |  |           |             |                                       |
| City / State:                               | Zip Code:                     |           |   |  | Phone N   | lumbe       | r:                                    |
| Email Address:                              |                               |           |   |  |           |             |                                       |
| 2. Identification                           |                               |           |   |  |           |             |                                       |
| A. Select one of the following; I am        | the:                          |           |   |  |           |             |                                       |
| □ Owner (Continue to section 4.)            |                               |           | ☐ Owner's Agent (Complete Sec. 2B. Continue to Sec. 3.) |  |           |             |                                       |
| B. Contractor                               |                               |           |   |  |           |             |                                       |
| Name:                                       |                               |           | Phone Number:   |  |           |             |                                       |
| Street Address:                             |                               | City, S   | ity, State:   |  |           | Zip Code:   |                                       |
| Email:                                      |                               | <u> </u>  |   |  |           |             |                                       |
| License Number:                             | ber: Expiration Date:         |           | UIA Number or Reason for Exemption:                     |  |           |             | r Exemption:                          |
| FEIN or Reason for Exemption:               | FEIN or Reason for Exemption: |           |   | Workers Comp. Insurance Carrier or Reason for Exemption: |           |             |                                       |
| 3. Proof of Authorization to                | Ohtain Pern                   | nit       |   |  |           |             |                                       |
| Complete this section only if you ARE       |                               |           | cord for t  | ne indicate  | d proper  | tv.         |                                       |
| By signing below, I attest that I am the    |                               |           |   |  |           | -           | oursuant to the                       |
| provisions of MCL 125.1510(2). I unde       |                               |           | _   |  |           |             |                                       |
| authorized by the property owner to         |                               | •         | •   |  |           |             | _                                     |
| requirement include: An architectural       | , engineering, c              | or const  | ruction co  | ontract, pov   | wer of at | torney      | , or letter of                        |
| authorization signed by the property of     | owner.                        |           |   |  |           |             |                                       |
| I am including a copy of the following      | (check one) wit               | th this a | pplication  | n to satisfy   | the requ  | iremei      | nt:                                   |
| ☐ Signed Contract ☐ Power of Atto           | rney □ Letter (               | of Auth   | orization   | □ Other (D   | escribe)  | New         | Construction ONLY:                    |
| -   | •                             |           |   |  |           |             | ocontractor for (List                 |
| Initials of Person Completing This Section: |                               |           |   |  |           | -<br>Builde | · · · · · · · · · · · · · · · · · · · |

| pe of Job (Check All Applicable)   |
|--|
| gle Family □ Commercial □ State Owned □ School □ Federal Building  |
| v Construction $\square$ Alteration $\square$ Special Inspection $\square$ Premanufactured Home Setup ( $\square$ State Approved $\square$ HUD)  |
| escription of Work   |
| <b>le a description of the proposed work.</b> For alterations to existing structures, list the area within the structure of oposed work. Be as specific as possible.   |
| structions & Disclaimers   |
| The work described in this application shall not commence until the permit for said work has been issued by the Building Department.  No work shall be concealed until it has been inspected and approved.  When ready for inspection, contact the Building Department providing as much advanced notice as possible. Inspection requests require at least 24 hours' notice.  Permits are valid for 180 days from the date of issuance. If work is not completed by the expiration date, you may request an extension. Extensions are granted at the sole discretion of the building official. A permit shall be deemed abandoned if work has not commenced within 180 days after the issuance of the permit. A permit may be closed when no inspections are requested prior to the expiration date of the permit. Closed and abandoned permits will not be refunded, and new permits shall be required should any abandoned work resume.  Submit the completed application and all applicable supporting documentation for review. Please refrain from submitting documents piecemeal. Doing so will delay the processing of your application by our staff.  Once the review of your application is completed, we will calculate the permit fee and assess any 3 <sup>rd</sup> party review fees. You will be notified that the permit is ready for pickup, and you may pay the fee at that time. Checks may be made payable to "Oshtemo Township". Credit/debit card payments are accepted in-person and online. There is a 3% processing fee assessed by our payment processor for credit/debit card payments. This |
| 3% processing fee is non-refundable. Cash payments are accepted in-person only.  |
| I hereby certify that I am the owner of record or a duly authorized agent for the same for the property indicated within this application. I certify that the specifications and plans are true and complete and contain a correct description of the building or structure, lot or parcel, and proposed work. All work shall be installed in accordance with the Michigan Building Code and all other applicable codes, standards, and ordinances. Work shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Plumbing Inspector.  Section 23a of the State Construction Code Act of 1972, 1972 PA 230, MCL 125.1523(A), 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.  Electronic Submissions: By submitting this application and typing your signature (or digitally affixing your signature to this  |
|  |

Applicant Signature

Print Name

Date

## 8. Fee Chart – Enter the number of items then multiply by the unit price for the total fee.

|    | Item  | Fee        | Qty | Total   |  |
|----|---|------------|-----|---------|--|
| 1  | Application Fee – Non-Refundable  | \$50.00    | 1   | \$50.00 |  |
| 2  | Manufactured Home Setup   | \$5.00 Ea  |     |         |  |
| 3  | Fixtures, Floor Drains, Special Drains, Water Connected Appliances <sup>1</sup> | \$5.00 Ea  |     |         |  |
| 4  | Stacks (Soil, waste, vent, conductor)   | \$3.00 Ea  |     |         |  |
| 5  | Sewage Ejectors, Sumps  | \$5.00 Ea  |     |         |  |
| 6  | Sub-Soil Drains   | \$5.00 Ea  |     |         |  |
| 7  | Water Heaters   | \$5.00 Ea  |     |         |  |
| 8  | Water Service: Less than 2"   | \$5.00 Ea  |     |         |  |
| 9  | Water Service: 2" to 6"   | \$25.00 Ea |     |         |  |
| 10 | Water Service: Over 6"  | \$50.00 Ea |     |         |  |
| 11 | Connection (Building Drain)   | \$5.00 Ea  |     |         |  |
| 12 | Sewers (Sanitary, storm, or combined): Less than 6"                             | \$5.00 Ea  |     |         |  |
| 13 | Sewers (Sanitary, storm, or combined): Greater than 6"                          | \$25.00 Ea |     |         |  |
| 14 | Water Distributing Pipe (System): ¾"  | \$5.00 Ea  |     |         |  |
| 15 | Water Distributing Pipe (System): 1"  | \$10.00 Ea |     |         |  |
| 16 | Water Distributing Pipe (System): 1 ¼"  | \$15.00 Ea |     |         |  |
| 17 | Water Distributing Pipe (System): 1 ½"  | \$20.00 Ea |     |         |  |
| 18 | Water Distributing Pipe (System): 2"  | \$25.00 Ea |     |         |  |
| 19 | Water Distributing Pipe (System): Greater than 2"                               | \$30.00 Ea |     |         |  |
| 20 | Reduced Pressure Zone Backflow Preventer  | \$5.00 Ea  |     |         |  |
| 21 | Medical Gas System  | \$5.00 Ea  |     |         |  |
| 22 | Fire Department Connection (FDC)  | \$25.00 Ea |     |         |  |
| 23 | Inspections: □Underground □Hydro □Rough-in □Final                               | \$50.00 Ea |     |         |  |
|    | Total Fee (Must Include \$50 Application Fee) →                                 |            |     |         |  |

<sup>&</sup>lt;sup>1</sup> Fixtures, Floor, Drains, and Water Connected Appliances include but are not limited to:

| Water Closets  | Sink (any description) | Slop Sink    | Drinking Fountain | Floor Drain    | Water outlet or Connection to Any Make up Water Tank |  |  |
|--|------------------------|--------------|-------------------|----------------|--|--|--|
| Bathtub  | 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 | Embalming Table   | Plaster Trap   | Water Connected Sterilizer                           |  |  |
| Urinal   | Ice Making Machine     |              | Bedpan Washer     | Water Softener | Water Connected Dental Chair                         |  |  |
| Autopsy  | Water Connected Still  |              |                   |                | Water Connection to Carbonated Beverage Dispenser    |  |  |
| Plus any other fixture, drain, or water connected appliance not specifically listed. |                        |              |                   |                |  |  |  |

## 9. Supplement to Plumbing Permit Application

If a consultation is requested prior to permit issuance, a \$50 fee will be billed. Plans must be submitted with this application, except as listed below. Plans are not required for the following residential project types:

- 1. One and Two Family dwellings containing not more than 3,500 square feet of building area.
- 2. Alterations and repair work determined by the building official to be of a minor nature.
- 3. Buildings with a required plumbing fixture count less than 12.

Plans are required for all other building types and commercial projects. Plans shall be prepared by or under the direct supervision of a registered design professional licensed pursuant to 1980 PA 299 and shall bear that designer's seal and signature.