



**COMMUNITY BUILDING SERVICES**

**Please select a jurisdiction:**

- DeWitt Charter Township
- City of DeWitt
- City of Grand Ledge

**DATE:** \_\_\_\_\_

**THIS APPLICATION IS FOR:**

\_\_\_\_\_  
(PRINT NAME OF OWNER)

\_\_\_\_\_  
(JOB SITE - STREET ADDRESS)

\_\_\_\_\_  
(CITY, STATE AND ZIP CODE)

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)

**PLUMBING PERMIT APPLICATION**

Plumbing Permit No. \_\_\_\_\_ Building Permit No. \_\_\_\_\_

TYPE OF EQUIPMENT:	PER UNIT	NO.	FEE
Fixtures, Water Connected Appl., Drains, Mobile Home Sites:	6.00 ea.		
<input type="checkbox"/> Water Closets			
<input type="checkbox"/> Bathtubs			
<input type="checkbox"/> Lavatories			
<input type="checkbox"/> Shower Stalls			
<input type="checkbox"/> Sink - (any type)			
<input type="checkbox"/> Laundry Tray			
<input type="checkbox"/> Drinking fountain			
<input type="checkbox"/> Dishwasher			
<input type="checkbox"/> Refrigerator			
<input type="checkbox"/> Water Heater			
<input type="checkbox"/> Acid Waste Drain			
<input type="checkbox"/> Condensate Drain			
<input type="checkbox"/> Floor Drain			
<input type="checkbox"/> Roof Drain			
<input type="checkbox"/> Slop Sinks			
<input type="checkbox"/> Bidet			
<input type="checkbox"/> Cuspidor			
<input type="checkbox"/> Emergency Eye-wash			
<input type="checkbox"/> Emergency Shower			
<input type="checkbox"/> Garbage Grinder			
<input type="checkbox"/> Urinal			
<input type="checkbox"/> Water Softener			
<input type="checkbox"/> Water Outlet Cooler			
<input type="checkbox"/> Ice Making Machine			
<input type="checkbox"/> Grease Trap			
<input type="checkbox"/> Starch Trap			
<input type="checkbox"/> Plaster Trap			
<input type="checkbox"/> Others not listed			
<input type="checkbox"/> Other water supplied device not specifically listed	3.00 ea.		
<input type="checkbox"/> Connection to a Fire Sprinkler or Irrigation System:	6.00 ea.		
<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)	6.00 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.		
Registration Fee (New contractor or expired license)	15.00		
Base Permit Fee (includes one (1) inspection)	65.00 ea.	1	65.00
Application Fee (non-refundable)	15.00	1	15.00
<b>TOTAL DUE:</b>	<b>\$</b>		

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

<b>DESCRIPTION OF WORK:</b>			
<b>BUSINESS / ORGANIZATION:</b>			
<b>CONTRACTOR:</b>		<b>EMAIL ADDRESS:</b>	
<b>PHONE NUMBER:</b> Office ( )	Cell ( )	Fax ( )	
<b>ADDRESS:</b>	<b>CITY:</b>	<b>STATE:</b>	<b>ZIP CODE:</b>
<b>STATE LICENSE NUMBER:</b>	<b>TYPE:</b>	<b>EXP. DATE:</b>	
<b>FEDERAL ID NO. OR REASON FOR EXEMPTION (DO NOT USE S.S.#):</b>			
<b>WORKERS COMP INS. CARRIER OR REASON FOR EXEMPTION:</b>			
<b>MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION:</b>			
<b>CONTRACTOR'S SIGNATURE:</b>			

**INSPECTION LINE: 517-277-0700**