LASALLE TOWNSHIP P.O. BOX 46 - 4111 LAPLAISANCE RD **LASALLE, MICHIGAN 48145**

PHONE: 734-241-4344

Date Of Application **State Owned:** Yes

1972 PA 230

Authority:

No

Plumbing Permit Application

I. Job Location	Parcel T	'ax ID#			Penalty	Permit can not be issued
NAME OF OWNER/AGENT				HAS A BUILDING	G PERMIT BEEN O	BTAINED FOR THIS PROJECT?
				☐ Yes	☐ No	☐ Not required
STREET ADDRESS & JOB LOCATION (Street No. an	GE OR TOWNSHIP IN WHICH JO	OB IS LOCATED		COUNTY		
		☐ City ☐ Villa	age 🗌 Township O I	F:		
II. Contractor/Homeowner Information						
INDICATE WHO THE APPLICANT IS	NAME C	F PLUMBING CONTRAC	TOR OR HOMEOWNER	CONTRAC	TOR LICENSE NUM	MBER EXPIRATION DATE
☐ Contractor ☐ Homeowner						
☐ Master ☐ Water Treatment Ins	taller					
ADDRESS (Street No. and Name)			CITY	STATE	STATE ZIP CODE	
TELEPHONE NUMBER (Include Area Code)			FEDERAL EMPLOYER ID NUMBER (or reason for exemption)			
WORKERS COMPENSATION INSURANCE CARRIEF	R (or reason for exe	mption)	MESC EMPLOYER NUMBER	(or reason for exen	nption)	
NAME OF MASTER PLUMBER				MASTER L	ICENSE NUMBER	EXPIRATION DATE
BUSINESS/BRANCH ADDRESS			OITY	OTATE		ZIP CODE
BUSINESS/BRANCH ADDRESS			CITY	STATE		ZIP CODE
III. Type of Job						
☐ Single Family ☐ New ☐	☐ Sewer On	У	☐ Water Service Only	☐ Prema	nufactured Ho	me Setup (State Approved)
☐ Other ☐ Alteration ☐	☐ Special In:	spection	•	☐ Manufa	actured Home	Setup (HUD Mobile Home)
IV. Plan Review Required						
Plans must be submitted with an App below.	olication for F	lan Examination a	and the appropriate dep	oosit before a	permit can be	e issued, except as listed
Plans are not required for the following: 1. One-and two-family dwelling con 2. Alterations and repair work deter 3. Buildings with a required plumbir 4. Work completed by a governmer If work being performed is described abo	taining not mo mined by the p ng fixture coun ntal subdivisior ve, check box	olumbing official to be t less than 12. or state agency cou below "Plans Not F	e of a minor nature. sting less than \$15,000.00 Required."			
Plans are required for all other building PA 299 and shall bear that architect's or			under the direct supervis	sion of an archi	tect or enginee	r licensed pursuant to 1980
Plans Not Required		Pla	n Review Project#			
V. Applicant Signature						
Section 23a of the state construction licensing requirements of this state resection 23a are subjected to civil fines	elating to pers					
SIGNATURE OF PLUMBING CONTRACTOR, MAST compliance with Section VI. Homeowner Affidavit)	ER PLUMBER, W	ATER TREATMENT INS	TALLER, OR HOMEOWNER (Ho	omeowner signatu	re indicates D	PATE
VI. Homeowner Affidavit					•	
I hereby certify the plumbing work descoccupy. All work shall be installed in accurate has been inspected and approved by	cordance with	the Michigan Plumb	oing Code and shall not l	be enclosed, o	covered up, o	r put into operation until it

VIIa. Fee Clarification

necessary inspections.

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.

Complete Application on Back Side

VIIb. Fee Clarification (continued)

viib. ree 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		
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	Water Heater	Bed Pan Washer	Water Softener	Water Connected Dental Chair		
Autopsy	Water Connected Still			Water Connectio	n 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
Application Fee (non-refundable)	\$50.00		\$50.00
2. Mobile Home Park Site *	\$5.00 each		
Fixtures, floor drains, special drains, water connected appliances	\$5.00 each		
4. Stacks (soil, waste, vent and conductor)	\$3.00 each		
5. Sewage ejectors, sumps	\$5.00 each		
6. Sub-soil drains	\$5.00 each		
Water Service			
7. Less than 2"	\$5.00		
8. 2" to 6"	\$25.00		
9. Over 6"	\$50.00		
10. Connection (bldg. drain - bldg. sewers)	\$5.00		
Sewers (sanitary, storm, or combined)			
11. Less than 6"	\$5.00		
12. 6" & Over	\$25.00		
13. Manholes, Catch Basins	\$5.00 each		

	FEE	# ITEMS	TOTAL
Watering Distributing Pipe (system)			
14. 3/4" Water Distribution Pipe	\$5.00		
15. 1" Water Distribution Pipe	\$10.00		
16. 1-1/4" Water Distribution Pipe	\$15.00		
17. 1-1/2" Water Distribution Pipe	\$20.00		
18. 2" Water Distribution Pipe	\$25.00		
19. Over 2" Water Distribution Pipe	\$30.00		
20. Reduced pressure zone back-flow preventer	\$5.00 each		
25. Domestic water treatment and filtering equipment only **	\$5.00		
26. Medical Gas System	\$45.00		
Inspections			
21. Special/Safety Insp. (includes cert. fee)	\$50.00		
22. Additional Inspection	\$50.00		
23. Final Inspection	\$50.00		
24. Certification Fee	\$50.00		

Total Fee

•	See	VIIa.	Fee	Clarification,	Item #2 on fron	t
**	0	١/١١৯		Clarification	Ham HOE above	

IX. Instructions for Completing Application Make C	hecks Payable to LaSalle Township
--	-----------------------------------

General: Plumbing work shall not be started until the application for permit has been filed. All installations shall be in conformance with the Michigan Plumbing Code. **No work shall be concealed until it has been inspected.** 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.

The Department 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.

Please give Location and Nearest Cross Roads		
•		

^{**} See VIIb. Fee Clarification, Item #25 above