



# CLAY TOWNSHIP

4710 Pointe Tremble (810) 794-9320  
P. O. Box 429 FAX: (810) 794-1964  
Algonac, MI 48001

## BLUE FORM

### PLUMBING PERMIT APPLICATION

AUTHORITY: P.A. 230 OF 1972 AS AMENDED  
COMPLETION: MANDATORY TO OBTAIN PERMIT  
PENALTY: PERMIT CANNOT BE ISSUED

#### I. JOB LOCATION

Name of Owner/Agent	Has a Building Permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required
Street Address & Job Location (Street No. and Name)	County

#### II. MASTER PLUMBER/HOMEOWNER INFORMATION

<input type="checkbox"/> Homeowner <input type="checkbox"/> Master Plumber	Name of Homeowner or Master Plumber	Master Plumber License Number	Expiration Date
Address (Street No. and Name)		City	State      Zip Code
Telephone Number	Social Security Number	Federal Employer ID Number	
Workers Compensation Insurance Carrier (or reason for exemption)		MESC Employer Number (or reason for exemption)	
Name of Contractor		Contractor License Number	Expiration Date
Address of Contractor		City, State, & Zip Code	

#### III. TYPE OF JOB

<input type="checkbox"/> Single Family <input type="checkbox"/> New	<input type="checkbox"/> Special Inspection <input type="checkbox"/> Premanufactured Home Setup (State Approved)	<input type="checkbox"/> State Owned
<input type="checkbox"/> Other <input type="checkbox"/> Alteration	<input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home)	<input type="checkbox"/> School

#### IV. PLAN REVIEW REQUIRED

See below for plan review requirements before completing this section.

Have plans been submitted?     YES     NO     NOT REQUIRED

---

Plans are not required for the following:

- One and two family dwellings containing not more than 3,500 square feet of building area.
- Alterations and repair work determined by the plumbing official to be of a minor nature.
- Assembly, business, mercantile, and storage buildings with a required plumbing fixture count less than 12.
- Work completed by a government subdivision or state agency costing less than \$15,000.00

If work being performed is described above, answer Section IV "Not required".

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 Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal.

PLANS MUST BE SUBMITTED BEFORE A PERMIT CAN BE ISSUED.

#### V. APPLICANT SIGNATURE

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 subject to civil fines.

Signature of Master Plumber/Contractor or Homeowner ( <u>Homeowner's signature indicates compliance with Section VI Homeowner Affidavit</u> )	Date	Date of Birth
---	------	---------------

#### VI. HOMEOWNER AFFIDAVIT

I hereby certify the plumbing work described on this permit application shall be installed by myself in my own home in which I am living or about to occupy. All work shall be installed in accordance with the State Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Clay Township Plumbing Inspector. I will cooperate with the Clay Township Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

**COMPLETE APPLICATION ON BACK SIDE**

# PLUMBING PERMIT APPLICATION

Revised 09/21/2016

## FEE CHART (If work does not add up to \$40.00 - Minimum Permit Fee will be charged)

	FEE	# ITEMS	TOTAL
<b>Application Fee</b> (Non-Refundable & Includes One Inspection)	<b>\$50.00</b>	<b>1</b>	<b>\$50.00</b>
Air Admittance Valves	\$5.00		
Air Compressor (medical)	\$25.00		
Bar Waste	\$5.00		
Bathtub	\$5.00		
Catchbasin	\$5.00		
Dental Equipment	\$5.00		
Dishwasher	\$5.00		
Drinking/Soda Fountain	\$5.00		
Floor Drain	\$5.00		
Garbage Disposal	\$5.00		
Gas piping (water heater)	\$5.00		
Hose Connection	\$5.00		
Humidifier	\$5.00		
Laundry Tray	\$5.00		
Lavatory, Single	\$5.00		
Medical Gas (per opening)	\$5.00		
RPZ (master plumber only)	\$15.00		
Refrigeration Waste	\$5.00		
Sewer/Private	\$5.00		
Sewer/Sanitary	\$5.00		

	FEE	# ITEMS	TOTAL
Shower Bath	\$5.00		
Single Family Modular	\$40.00		
Sink, Kitchen	\$5.00		
Slop Sink	\$5.00		
Stacks	\$5.00		
Sump Pump	\$5.00		
Mobile Home in Park	\$40.00		
Vacuum System (medical)	\$25.00		
Washing Machine	\$5.00		
Water Closet	\$5.00		
Water Dist. System	\$5.00		
Water Heater	\$5.00		
Water Softener	\$5.00		
Minimum Permit	\$40.00		
Commercial Inspections	\$50.00		
Underground Inspection	\$50.00		
Rough Inspection	\$50.00		
Final Inspection	\$50.00		
Re-Inspection	\$50.00		
Contractor Registration	\$10.00		

Make checks payable to "CLAY TOWNSHIP"

**TOTAL FEES:**

--

**LEAD FREE NOTICE:** The State Construction Code Act, Act No. 230 of the Public Acts of 1972, as amended, requires pipes, pipe fittings, solder of flux, which are used in the installation or repair of a plumbing system in a building or structure, providing water for human consumption or a public water system, be lead free. Lead free is defined as solder or flux containing not more than 0.2% lead; and pipe and pipe fittings containing not more than 8% lead. These provisions do not apply to leaded joints necessary for the repair of cast iron pipes.

### INSTRUCTIONS FOR COMPLETING APPLICATION

**GENERAL:** Plumbing work shall not be started until the application for permit has been filed with the Clay Township Building Department. All installations shall be in conformance with the State Plumbing Code.

**No work shall be concealed until it has been inspected.**

Clay Township Building Department's telephone number will be provided on the issued permit. Please call at least 24 hours in advance when ready for inspections

**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 CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OF THE PERMIT OR WITHIN SIX MONTHS OF THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED OR REINSTATED.**

**FOR OFFICE USE ONLY**

Reviewed and Approved by \_\_\_\_\_

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Clay Township Plumbing Inspector