



**BUILDING DEPARTMENT**  
**1401 W. HERBISON ROAD**  
**DEWITT, MICHIGAN 48820**  
**PHONE: (517) 668-0278**  
**FAX: (517) 669-6496**  
[www.dewitttownship.org](http://www.dewitttownship.org)

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

THIS APPLICATION IS FOR:

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

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

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

1. 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)

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

**PLUMBING PERMIT APPLICATION**

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

TYPE OF EQUIPMENT:	PER UNIT	NO.	FEE
Application Fee (non-refundable)	10.00	1	10.00
Base Permit Fee: (includes one (1) inspection)	65.00 ea.		
Fixtures, Water Connected Appl., Drains, Mobile Home Sites: <input type="checkbox"/> Water Closets <input type="checkbox"/> Slop Sinks <input type="checkbox"/> Bathtubs <input type="checkbox"/> Bidet <input type="checkbox"/> Lavatories <input type="checkbox"/> Cuspidor <input type="checkbox"/> Shower Stalls <input type="checkbox"/> Emergency Eye-wash <input type="checkbox"/> Sink - (any type) <input type="checkbox"/> Emergency Shower <input type="checkbox"/> Laundry Tray <input type="checkbox"/> Garbage Grinder <input type="checkbox"/> Drinking fountain <input type="checkbox"/> Urinal <input type="checkbox"/> Dishwasher <input type="checkbox"/> Water Softener <input type="checkbox"/> Refrigerator <input type="checkbox"/> Water Outlet Cooler <input type="checkbox"/> Water Heater <input type="checkbox"/> Ice Making Machine <input type="checkbox"/> Acid Waste Drain <input type="checkbox"/> Grease Trap <input type="checkbox"/> Condensate Drain <input type="checkbox"/> Starch Trap <input type="checkbox"/> Floor Drain <input type="checkbox"/> Plaster Trap <input type="checkbox"/> Roof Drain <input type="checkbox"/> Others not listed  <input type="checkbox"/> Other water supplied device not specifically listed <input type="checkbox"/> Connection to a Fire Sprinkler or Irrigation System: <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)	3.00 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.		
<b>TOTAL</b>			

DESCRIPTION OF WORK:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>CONTRACTOR:</b>		<b>OFFICE NO.:</b>	
<b>CELL NO.:</b>		<b>FAX NO.:</b>	
<b>ADDRESS:</b>	<b>CITY:</b>	<b>STATE:</b>	<b>ZIP CODE:</b>
<b>EMAIL:</b>	<b>STATE LICENSE NO.:</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>			