



# PLUMBING PERMIT APPLICATION

111 E Nine Mile Road  
 Hazel Park, MI 48030  
 (248)546-4075 (248)414-5951 fax  
[www.hazelpark.org](http://www.hazelpark.org)

JOB ADDRESS: \_\_\_\_\_  
 OWNER'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 OWNER'S ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_  
 APPLICANT'S ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

|                            |                      |
|----------------------------|----------------------|
| Social Security No:        | Federal Employer ID: |
| Worker's Comp Ins. Carrier | MESC Employer ID:    |

**FEES & WORK DESCRIPTION:**

| No. of Inspections | Type of Inspection or Fee | Fee     | Cost (No x Fee) |
|--------------------|---------------------------|---------|-----------------|
| Required           | Administrative Fee        | \$20.00 | \$20.00         |
|                    | Temporary Service         | \$75.00 |                 |
|                    | Permanent Service         | \$75.00 |                 |
|                    | Underground Inspection    | \$75.00 |                 |
|                    | Rough Inspection          | \$75.00 |                 |
|                    | Final Inspection          | \$75.00 |                 |
|                    | Other:                    | \$75.00 |                 |
|                    | Other:                    |         |                 |
|                    | <b>TOTAL FEES</b>         |         |                 |

| FOR OFFICE USE ONLY           |       |
|-------------------------------|-------|
| FEES                          | PAID  |
| Permit: _____                 | _____ |
| Registration: <u>\$15.00</u>  | _____ |
| Investigative Fee: _____      | _____ |
| Other: _____                  | _____ |
| <b>TOTAL:</b> _____           | _____ |
|                               |       |
| Code Official Approval: _____ |       |

Date Approved for Issue: \_\_\_\_\_

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

PLAN REVIEW: Plan review is required when the building exceeds 3,500 square feet and the service exceeds 400 amperes. Required plans shall be prepared under the direct supervision of a qualified architect or engineer licensed pursuant to Act 200, of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's seal.

HAVE PLANS BEEN SUBMITTED: YES: \_\_\_\_\_ NO: \_\_\_\_\_ NOT REQUIRED: \_\_\_\_\_

APPLICANT'S SIGNATURE: Section 23A of the State Construction 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 residential structure. Violators of Section 23A are subject to civil fines.

HOMEOWNER AFFIDAVIT: I hereby certify the 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 electrical code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the Inspector and assume the responsibility to arrange for necessary inspections.

I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS:

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ DRIVER'S LICENSE NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_