GRANT TOWNSHIP SHERIDAN TOWNSHIP

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permit No.\_\_\_\_\_\_\_\_\_\_\_

Payment Method:

 CASH CHECK

Check No.\_\_\_\_\_\_\_­­­­­\_\_\_\_

 CLARE COUNTY

 MECHANICAL PERMIT

 P.O. BOX 208 CLARE MI 48617

 PH: 989-339-4274 Fax: 989-386-4484

Street Address of **Job**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 NEW REMODEL Date of Application:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Ready:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 COMMERCIAL RESIDENTIAL Property ID:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Associated

Permits:

**Building** Permit No.\_\_\_\_\_\_

**Electric** Permit No.\_\_\_\_\_\_

**Plumbing**

Permit

No\_\_\_\_\_\_\_\_\_\_\_

**CONTRACTOR INFORMATION**

Contractor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_ Zipcode:\_\_\_\_\_\_\_\_\_\_\_\_

Phone No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State License No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *HOMEOWNER AFFIDAVIT*

I hereby certify the mechanical work described on this permit application shall be installed by myself in my own home which I am living or about

to occupy. All work shall be installed in accordance with the State Mechanical Code and **SHALL NOT** be enclosed, covered up, or put into operation

 until it had been inspected and approved by the County Mechanical Inspector. I **WILL** cooperate with the County Mechanical Inspector and assume

 the responsibility to arrange for necessary inspections.

  ***I agree fully comply with the mechanical laws of the State of Michigan.***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Contractor of Authorized Representative Phone Number

 FEE CHART

 

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | PER UNIT | QTY |  FEE |  | PER UNIT | QTY |  FEE |
| **MECHANICAL APPLICATION FEE** (INCLUDES $12 ADMIN FEE) ALL NON-REFUNDABLE  | $50 |  |  | **AIR HANDLING** (1000 TO 10,000 CFM) | $39 |  |  |
| **HEAT SYSTEM:** GAS, OIL, HVAC, HEAT PUMP, SOLID FUEL | $33 |  |  | **AIR HANDLING** (Over 10,000 CFM) | $55 |  |  |
| **FIREPLACE AND VENT** | $24 |  |  | **TANKS** ( LPG/FUEL Oil) includes piping to building entry | $50 |  |  |
| **CHIMNEY** (Factory Build) **CHIMNEY RE-LINING, B VENT** | $23 |  |  | **HUMIDIFIERS, HEAT RECOVERY, VAV BOX, UNIT VENTILATORS** | $10 |  |  |
| **DAMPERS** (Flue, Vent, Fire) | $7 |  |  |  **COMMERCIAL HOODS** | $39 |  |  |
| **DUCT SYSTEM/ HYDRONIC PUMP** | $30 |  |  | **CHILLERS/COOLING TOWERS/COMPRESSORS**  | $28 |  |  |
| **BATH/KITCHEN FANS** (UNDER 1000 CFM) | $7 |  |  | **FIRE SUPPRESSION $.55/HEAD** (MIN. $19, ROUND UP TO NEAREST WHOLE DOLLAR) NOTE: ALL FIRE SUPPRESSION PLANS & SPECS MUST BE SENT TO MT. PLEASANT FIRE DEPT. FOR APPROVAL PRIOR TO STARTING WORK. | $19 PLUS ADDITIONAL HEAD |  |  |
| **CENTRAL A/C, SPLIT REFRIGERATION, EVAP. COOLING** | $24 |  |  | **FINAL INSPECTION AND/OR RE-INSPECTION** | $55 |  |  |
| **WATER HEATER AND VENT** | $10 |  |  | **SPECIAL INSPECTION** | $55 |  |  |
| **GAS PIPING** (Each Outlet) | $9 |  |  | **MOBILE HOME INSPECTION** | $36 |  |  |
| **INFARED/TERMINAL UNIT HEATERS** | $39 |  |  | **LP TANK CHANGE OUT** | $50 |  |  |

 **MAKE CHECKS PAYABLE TO THE TOWNSHIP THE WORK IS BEING COMPLETED IN.** TOTAL FEES $\_\_\_\_\_\_\_\_\_\_\_\_

 *“Township of Grant” or “Township of Sheridan”*

Instructions for completing application: General: Mechanical work shall not ne started until the application for permit has been filed with the township. All installations shall be in conformance with the State Mechanical Code. No work shall be concealed until it has been inspected**. Call the Building Office at 989-339-4247** to schedule an inspection providing as much advance notice as possible. **You will need to provide the job location and permit number.**

Expiration of permits: A permit remains valid if 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 CANCELED WHEN NOT INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE SATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELED PERMITS CANNOT BE REFUNDED OR REINSTATED. **TOTAL PERMIT FESS MAY BE DOUBLED IF WORK IS STARTED BEFORE PERMIT IS ISSUED.**