

Application Date \_\_\_\_\_

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OFFICE USE ONLY

# PLUMBING PERMIT

PERMIT # \_\_\_\_\_

Date Ready \_\_\_\_\_

MASON COUNTY BUILDING DEPARTMENT

102 E. 5<sup>th</sup> St. Scottville, MI 49454 ph. (231)757-9345 fax (231)757-9253

## JOB LOCATION

Name of Owner/Agent	Homeowner Phone	Has a building permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address/Job Location	City/Village	Township	

## CONTRACTOR/HOMEOWNER INFORMATION

<input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner	Name	License Number	Expiration Date	
Mailing Address (Street Number and Name or P.O. Box)		City	State	Zip Code
Telephone Number	MESC Employer No.	Fed Employee ID No.	Workers Comp Insurance Carrier	
Email Address				

## APPLICANT SIGNATURE: PLEASE READ AND SIGN BELOW

Section 23 A of the State Construction Code Act of 1972; Public Act 230 of 1972, MCL 125.1523a, prohibits a person from conspiring to circumvent the licensing requirements of the State of Michigan relating to persons who are to perform work on a residential building or a residential structure. Violations of Section 23A are subject to civil fines.

Signature of Homeowner or Licensee \_\_\_\_\_

*Homeowner Signature indicates compliance with Section VI, Homeowner Affidavit*

*Homeowners Affidavit:* I certify that the plumbing work described on this permit application shall be installed by myself in my own dwelling 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 County Plumbing Inspector. I will cooperate with the County Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

## TYPE OF JOB (check all that apply):

Residential \_\_\_\_\_ New Construction \_\_\_\_\_ Replacement Unit \_\_\_\_\_ Other (describe) \_\_\_\_\_  
Commercial \_\_\_\_\_ Repair/Alteration \_\_\_\_\_ Underground \_\_\_\_\_

## FEE CHART: ENTER THE NUMBER OF ITEMS BEING INSTALLED, MULTIPLY BY THE UNIT PRICE FOR TOTAL FEE.

	PER UNIT	No. of UNITS	FEE		PER UNIT	No. of UNITS	FEE
<b>APPLICATION FEE REQUIRED, non-refundable, includes one inspection</b>	\$60.00			Manholes, Catch Basins	\$6 each		
Mobile Home Set Up	\$66.00			<b>Watering Distribution Pipe (System)</b>			
Fixtures, washer, toilets, special drains, water connected appliances	\$6 each			3/4 Inch water distribution pipe	\$6.00		
Stacks (soil, waste, vent and conductor)	\$4 each			1-inch water distribution pipe	\$12.00		
Sewage ejectors, sumps	\$4 each			1 1/4-inch water distribution pipe	\$18.00		
Sub-soil drains	\$6 each			1 1/2-inch water distribution pipe	\$24.00		
<b>Water Service, Less than 2-inch</b>	\$6.00			2-inch water distribution pipe	\$30.00		
2-inch to 6 inch	\$30.00			Over 2-inch water distribution pipe	\$36.00		
Over 6-inch	\$60.00			Reduced pressure back zone back-flow prevent.	\$6.00		
Connection Building, Drain, Sewer	\$6.00			<b>ADDITIONAL INSPECTIONS (final, re-inspection, code evaluation)</b>	\$60.00		
<b>Sewer (sanitary, storm, or combined)</b>				UNANNOUNCED INSPECTION	\$102.00		
Less than 2-inch	\$6.00			PLAN REVIEW (contact the office for price)			
2-inch to 6-inch	\$6.00			<b>TOTAL FEE</b> _____			
Over 6-inch	\$30.00			<b>Make checks payable to: Mason County</b>			

## FEE CLARIFICATION

**Fixtures, Floor Drains, Special Drains, and Water Connected Appliances Include (ALPHABETICAL ORDER):**

Acid Waste Drain	Drinking Fountain	Laundry Tray	Sprinkler System Connection (Irrigation)	Water Connected Still
Autopsy Sink	Embalming Table	Lavatories	Starch Trap	Water Heater
Bathtub	Emergency Eye Wash	Plaster Trap	Urinal	Water Outlet Cooler
Bed Pan Washer	Emergency Shower	Refrigerator	Washing Machine	Water Outlet to Filter
Bidet	Floor Drain	Roof Drain	Water Closets	Water Outlet to Heating Syst.
Condensate Drain	Garbage Disposal	Shower Stall	Water Connected Carbonated Bev. Dispenser	Water Outlet or Connection to Make-Up Water Tank
Cuspidor	Grease Trap	Sink (any description)	Water Connected Dental Chair	Water Softener
Dishwasher	Ice Making Machine	Slop Sink	Water Connected Sterilizer	

## IMPORTANT INFORMATION

- Plumbing work shall not be started until the application for permit has been filed with the Mason County Building Department. All installations shall be in conformance with the State of Michigan Plumbing Code. **No work shall be concealed until it has been inspected.**
- INSPECTIONS:** When ready for an inspection, call the inspector at (231) 757-9345 ext. 316 and provide as much information as possible including a phone number, permit number, Township/City, and address. Call at least 48 hours in advance of the needed inspection. Special instructions such as directions to a remote location, how to open a gate, or which door will be left open should also be given. If an inspector cannot enter the property, an additional inspection may be charged.
- EXPIRATION OF PERMIT:** A permit may be cancelled after one year from the date of issuance. Cancelled permits cannot be refunded or reinstated. Those needing additional time after one year from the permit issue date will be charged a \$40 renewal fee per 6 month extension.
- PLAN REVIEW:** Plans prepared under the direct supervision of a licensed engineer or architect (pursuant Act 299 of 1980) are REQUIRED for all commercial projects and homes over 3500 square feet. PLANS MUST BE SUBMITTED AND APPROVED BY THE PLUMBING INSPECTOR BEFORE A PERMIT CAN BE ISSUED. Alterations and repair work within a commercial/public operation determined by the plumbing inspector to be of a minor nature may be exempted from the plan review requirement.
- Mason County will not discriminate against any individual or group because of race, sex, religion, national origin, color, marital status, handicap, or political beliefs.