

### APPLICATION FOR PLUMBING PERMIT

**SECTION 1. Job Location**

Date \_\_\_\_\_

Has a building permit been obtained for this project? Yes/ Permit # \_\_\_\_\_ Not Required \_\_\_\_\_

Name of owner/agent:	Phone _____ Cell Phone _____
Address	City and Zip Code

**SECTION 2. Contractor/Homeowner Information**

Indicate who the applicant is:

- Contractor
- Homeowner

Name:
Address (Street Number and Name):
City, State, Zip:

Phone: _____
Cell: _____
FAX: _____

**SECTION 3. Type of Job**

\_\_\_ Single Family \_\_\_ New \_\_\_ Sewer only \_\_\_ Premanufactured Home Setup \_\_\_ State Owned  
\_\_\_ Other \_\_\_ Alteration \_\_\_ Water Service Only \_\_\_ Manufactured Home Setup \_\_\_ School  
(HUD Mobile Home)

Describe work to be completed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION 4. Plan Review Required**

Plans Not Required  Plan Review Submission No. \_\_\_\_\_

Plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued, except as listed below. Plans are not required for the following:

1. One and two-family dwellings containing not more than 3,500 square feet of building area.
2. Alterations and repair work determined by the plumbing official to be of a minor nature.
3. Work completed by a governmental subdivision or state agency costing less than \$15,000.00.

If work being performed is described above, check box "Plans Not Required."

Plans are required for all other building types and shall be prepared by or under the direct supervision of an architect's or engineer's seal and architect or engineer licensed pursuant to 1980 PA 299 and shall bear that signature.

**SECTION 5. Applicant Signature**

Section 23a of the state construction code act of 1972, 1972 PA230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of the 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.

Signature of Plumbing Contractor, Master Plumber, Water Treatment Installer or Homeowner,  
(Homeowner signature indicates compliance with Section 6, Homeowner Affidavit)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 6. 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 Michigan Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Rives Township Plumbing Inspector.  
I will cooperate with the Rives Township Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

**SECTION 7. Fees**

**Inspection fees are \$80.00 per inspection.**

**Make checks payable to "Rives Township".**

Enter the number of items being installed:

- |   |   |
|---|---|
| <input type="checkbox"/> Fixtures, floor drains, special drains, water connected appliances | <input type="checkbox"/> 3/4" Water Distribution Pipe               |
| <input type="checkbox"/> Stacks (soil, waste, vent and conductor)                           | <input type="checkbox"/> 1" Water Distribution Pipe                 |
| <input type="checkbox"/> Sewage ejectors, sumps   | <input type="checkbox"/> 1 1/4" Water Distribution Pipe             |
| <input type="checkbox"/> Sub-soil drains  | <input type="checkbox"/> 1 1/2" Water Distribution Pipe             |
| <input type="checkbox"/> Water Service less than 2"   | <input type="checkbox"/> 2" Water Distribution Pipe                 |
| <input type="checkbox"/> Water Service 2" to 6"   | <input type="checkbox"/> Over 2" Water Distribution Pipe            |
| <input type="checkbox"/> Water Service over 6"  | <input type="checkbox"/> Reduced pressure zone back-flow preventor  |
| <input type="checkbox"/> Connection (bldg. drain - bldg. sewers)                            | <input type="checkbox"/> Medical Gas System                         |
| <input type="checkbox"/> Domestic water treatment and filtering equipment only              | <input type="checkbox"/> Manholes, Catch Basins                     |
| <input type="checkbox"/> Sewers less than 6" (sanitary, storm or combined)                  | <input type="checkbox"/> Sewers 6" & over (sanitary, storm or comb) |

**SECTION 8. Instructions for Completing Application**

**General:** Mechanical work shall not be started until the application for permit has been filed with Rives Township. All installations shall be in conformance with the Michigan Mechanical Code. No work shall be concealed until it has been inspected. The telephone number for the inspector will be provided on the permit form. When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the job location and permit number.

**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 twelve (12) 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 CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN TWELVE (12) MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED OR REINSTATED.**

**Where to Submit Application:** Rives Township is responsible for code enforcement in the township. Permit applications should be sent to the address on the front of this application. Questions regarding permits may be directed to the Rives Township Treasurer at 517-569-3100, ext 2#.