

Date ____ / ____ / ____
VILLAGE OF STOCKBRIDGE

PLUMBING PERMIT

VILLAGE OF STOCKBRIDGE
 BUILDING DEPARTMENT
 PO Box 155 / 305 W Elizabeth St 107
 Stockbridge, MI 49285
 Phone 517-851-7435
 Fax 517-772-6222
 Bldg. Dept. 800-627-2801

Permit # : _____

Job Location: _____

Owner: _____

Phone No. : _____

Address: _____

City/State/Zip : _____

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

COMMERCIAL			RESIDENTIAL	
	No.	ITEMIZATION		
Administration base fee and all required and final inspections	XXX		\$110.00	SINGLE INSPECTION \$77.00
Plan Review - determined by Plan Reviewer		\$77.00	pr Hr	ADDITION/REMODEL Up to Two Inspections \$154.00
Fixtures, water connected appliances, floor drains, special drains, mobile home unit site		\$5.50	each	ADDITION REMODEL w/Underground Up to Three Inspections \$231.00
Stacks (Soil, waste, vent, conductor)		\$3.30	each	NEW RESIDENCE Up to Three Inspections \$231.00
Sewers (sanitary, storm or combined)		\$5.50	each	NEW RESIDENCE W/Underground Up to Four Inspections \$308.00
Water Service		\$11.00	each	
Connection building drain/building sewer		\$5.50	each	FOR RESIDENTIAL PERMITS: Please indicate applicable equipment in the "No." column, and disregard commercial fee schedule.
Sub-soil drains		\$5.50	each	
Sewage ejectors, manholes, sumps		\$5.50	each	
Water distributing pipe system, less than 1"		\$11.00	each	
Water distributing pipe system, 1" or greater		\$22.00	each	COST OF PERMIT: \$ _____ Make checks payable to: VILLAGE OF STOCKBRIDGE Building Department Approval: By: _____
Reduced pressure zone backflow preventer		\$5.50	each	
Medical Gas System		\$49.50	each	
TOTAL: (Enter here and at right as COST OF PERMIT:)				
Contractor Name		Phone ()		
Address		City	State	Zip
Federal I.D. No./Special Security No.		MESC Employer No.		
Contractor License No.		Expiration Date		Worker's Compensation Insurance Carrier
Name of Master Plumber		Master License No.		Expiration Date
Master Plumber Business Address		City	State	Zip
If exempt from any of the above, explain here: E-mail: _____ _____ I am/will be the owner and occupant of the premises on which the described installation is proposed.				
Section 23A of the state construction code act of 1972, 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 23 A are subjected to civil fines.				

HOME OWNER'S AFFIDAVIT and SIGNATURE

I hereby certify that the work described above shall be installed in accordance with the local 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 and timely inspections.

Signed: _____

Date: _____

AGENT/CONTRACTOR'S AFFIDAVIT and SIGNATURE

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: _____

Date: _____