



Authority: 1972 PA 230 Completion: Mandatory to obtain permit Penalty: Permit cannot be issued	<b>The City of St. Joseph</b> will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.
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**I. Project or Facility Information**

NAME OF OWNER/AGENT/SCHOOL/STATE DEPT.		HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required	
STREET ADDRESS AND JOB LOCATION (Street Number and Name)	NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township <b>OF:</b>	COUNTY	

**II. Applicant/Facility Contact Information**

INDICATE APPLICANT <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner	NAME OF HOMEOWNER/CONTRACTOR	COMPANY NAME	LICENSE NUMBER	EXPIRATION DATE
ADDRESS (Street Number and Name)	CITY	STATE	ZIP CODE	
TELEPHONE NUMBER (Include Area Code)	FEDERAL EMPLOYER ID NUMBER (or reason for exemption)			
WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption)	UIA NUMBER (or reason for exemption)			

**III. Type of Job**

<input type="checkbox"/> <b>Single Family</b>	<input type="checkbox"/> New	<input type="checkbox"/> Special Inspection	<input type="checkbox"/> <b>State Owned</b>
<input type="checkbox"/> <b>Other</b>	<input type="checkbox"/> Alteration	<input type="checkbox"/> Premanufactured Home Setup (State Approved) <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home)	<input type="checkbox"/> <b>School</b>

**IV. Plan Review Information**

**Plans must be submitted with an Application for Plan Examination and the appropriate deposit before a permit can be issued, except as listed below.**

**Plans are not required** for the following:

- One-and two-family dwellings when the total building heating/cooling system input rating is 375,000 Btu's or less.
- Alterations and repair work determined by the mechanical official to be of a minor nature.
- Business, mercantile, and storage buildings having HVAC equipment only, with one fire area and not more than 3,500 square feet.
- Work completed by a governmental subdivision or state agency costing less than \$15,000.00.

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

What is the building size in square footage? \_\_\_\_\_  
 What is the input rating of the heating system in this building? \_\_\_\_\_

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

**BCC Plan Review Project No.** \_\_\_\_\_       **Plans Not Required**

**V. Applicant Signature**

**Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, 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 a residential structure. Violators of section 23a are subjected to civil fines.**

SIGNATURE OF CONTRACTOR OR HOMEOWNER (Homeowner's signature indicates compliance with Section VI. Homeowner Affidavit)	DATE
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**VI. Homeowner Affidavit**

I hereby certify the mechanical 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 Mechanical Code and **shall not be enclosed, covered up, or put into operation** until it has been **inspected and approved** by the City Mechanical Inspector. I will cooperate with the City Mechanical Inspector and assume the responsibility to arrange for necessary inspections.

**Complete Application on Back Side**

**Item #2, Residential Heating System:** This item is used for the installation of a heating system in a **new residential structure**. Items #10 Gas Piping and #18 Duct need not be added. Replacement systems should be itemized.

	Fee	# of Items	Total		Fee	# of Items	Total
1. Application Fee (non-refundable)	\$75.00	1	\$75.00	43. Exhausters (commercial)	\$15.00		
2. Residential Heating System (includes duct & pipe) New Building Only*	\$50.00			18. Duct - minimim fee \$25.00	\$.10 /ft		
3. Gas/Oil Burning Equipment (furnance, roof top units, generators)	\$30.00			19. Heat Pumps; Commercial (pipe not included)	\$20.00		
4. Boiler	\$30.00			<b>Air Handlers/Heat Wheels</b>			
5. Water Heater (gas piping & venting-direct replacement only)	\$5.00			20. Under 10,000 CFM	\$20.00		
6. Damper (control, back-draft, barometric or fire/smoke)	\$5.00			21. Over 10,000 CFM	\$60.00		
7. Solid Fuel Equipment (includes chimney)	\$30.00			22. Commercial Hoods	\$15.00		
8. Chimney, factory built (installed separately), B Vent, PVC Venting	\$25.00			23. Heat Recovery Units	\$10.00		
37. Gas Burning Fireplace	\$30.00			24. V.A.V. Boxes (all variable volume or zone damper equipment)	\$10.00		
9. Solar; set of 3 panels-fluid transfer (includes piping)	\$20.00			25. Unit Ventilators/PTAC Units	\$10.00		
10. Gas Piping; each opening-new install (residential)	\$5.00			26. Unit Heaters (terminal units)	\$15.00		
11. Air Conditioning (incl. split systems) RTU-Cooling Only	\$30.00			27. Fire Suppression/Protection (includes piping)-minimum fee \$20.00	\$.75 / head		
12. Heat Pumps (split systems) or Geothermal (complete residential)	\$30.00			28. Coils (Heat/Cool)	\$30.00		
13. Dryer, Bath & Kitchen Exhaust (residential ducting not included)	\$5.00			29. Refrigeration (split system)	\$30.00		
16. Humidifiers/Air Cleaners	\$10.00			<b>Chiller/Cooling Towers</b>			
<b>Tanks</b>				30. Chiller-Refrigeration	\$30.00		
14. Aboveground (other than L.P.)	\$20.00			44. Chiller-Air Conditioning	\$30.00		
38. Aboveground Connection	\$20.00			31. Cooling Towers-Refrigeration	\$30.00		
15. Underground (other than L.P.)	\$25.00			45. Cooling Towers-Air Conditioning	\$30.00		
39. Underground Connection	\$25.00			32. Compressor/Condenser	\$30.00		
<b>Piping (ALL piping-minimum fee \$25.00)</b>				<b>Inspections</b>			
17. Fuel Gas Piping	\$.05 /ft			33. Special Insp. (pertaining to sale of bldg.)	\$75.00		
40. Process Piping	\$.05 /ft			34. Additional Inspection	\$75.00		
41. Hydronic Piping	\$.05 /ft			35. Final Inspection	\$75.00	1	\$75.00
42. Refrigeration Piping	\$.05 /ft			36. Certification Fee	\$30.00		
46. Commercial Air Conditioning Piping	\$.05 /ft						

\*See VII. Fee Schedule Item #2 above

NOTE: Under special circumstances the bureau will assess an hourly fee for inspection services at a rate of \$75.00 per hour.

**Total Fee** (Must Include the \$75 non-refundable application and \$75 final inspection fees)

**Make checks payable to "City of St. Joseph"**

VIII. Instructions for Completing Application

**General:** Mechanical work shall not be started until the application for permit has been filed with the City of St .Joseph Inspection Department. 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 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 CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED OR REINSTATED.**

**Where to Submit Application:** Permit applications should be sent to the address on the front of this application directed to the City of St .Joseph Inspection Department, 269-983-1212.

Validation Area