PLUMBING PERMIT APPLICATION

CITY OF ROYAL OAK - BUILDING DEPARTMENT
211 Williams Street ● P.O. Box 64 ● Royal Oak, MI 48067
Telephone: 248-246-3210 Inspection Request: 248-246-3234
EFFECTIVE 6-16-09

I. JOB LOCATION

PLUMBING PERMIT NO.

NAME OF OWNER/AGENT	HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT? ❑ YES ❑ NO ❑ NOT REQUIRED		
JOB LOCATION (STREET NO. & NAME)	APT. OR SUITE NO.	BSC PROJECT NO.	PLAN REVIEW NO.

II. CONTRACTOR/HOMEOWNER INFORMATION

❑ **CONTRACTOR** ❑ **HOMEOWNER**	NAME OF LICENSEE OR HOMEOWNER:		LICENSE NUMBER:
BUSINESS ADDRESS (STREET NO. & NAME)	CITY	STATE	ZIP CODE
TELEPHONE NUMBER: ( )	FEDERAL ID NUMBER:	WORKERS COMP. INSURANCE CARRIER OR REASON FOR EXEMPTION:	MESC EMPLOYER NO. OR REASON FOR EXEMPTION:

III. TYPE OF JOB

❑ **COMMERCIAL**	❑ NEW	**DESCRIPTION OF WORK:**
❑ **RESIDENTIAL**	❑ ALTERATION	
❑ SINGLE FAMILY	❑ REPLACEMENT	

IV. PLAN REVIEW REQUIREMENT

PLANS MUST BE SUBMITTED WITH AN APPLICATION FOR PLAN REVIEW 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 DWELLING CONTAINING NOT MORE THAN 3,500 SQUARE FEET OF BUILDING AREA.
2. ALTERATIONS AND REPAIR WORK DETERMINED BY THE PLUMBING INSPECTOR TO BE OF A MINOR NATURE.
3. WORK COMPLETED BY A GOVERNMENTAL SUBDIVISION OR STATE AGENCY COSTING LESS THAT $15,000.00.

IF WORK BEING PERFORMED IS DESCRIBED ABOVE, CHECK BOX BELOW **"NOT REQUIRED".**

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.

HAVE PLUMBING PLANS BEEN SUBMITTED? ❑ **YES** ❑ **NO** ❑ **NOT REQUIRED**

PLANS MUST BE SUBMITTED AND APPROVED BEFORE A PERMIT CAN BE ISSUED.

V. 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 2003 MICHIGAN RESIDENTIAL CODE, 2006 MICHIGAN PLUMGING CODE. THE **WORK SHALL NOT BE ENCLOSED**, COVERED UP OR PUT INTO OPERATION UNTIL IT HAS BEEN **INSPECTED** AND **APPROVED** BY THE PLUMBING INSPECTOR. I WILL COOPERATE WITH THE PLUMBING INSPECTOR AND ASSUME THE RESPONSIBILITY TO ARRANGE FOR NECESSARY INSPECTION.

VI. 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 SUBJECT TO CIVIL FINES.

HOMEOWNER'S SIGNATURE INDICATES ACKNOWLEDGEMENT, ACCEPTANCE AND COMPLIANCE WITH SECTION V - HOMEOWNER AFFIDAVIT. SEE ABOVE.

THE UNDERSIGNED ACKNOWLEDGES READING AND UNDERSTANDING FRONT AND BACK SIDES OF THIS APPLICATION.

SIGNATURE OF LICENSEE OR HOMEOWNER ONLY:	DATE :
PLEASE PRINT:	

CONTINUED ON PAGE 2

VIII. FEE CHART (Effective 6-16-09)

ENTER THE NUMBER OF ITEMS BEING INSTALLED, MULTIPLY THE TOTAL QUANTITY OF EACH ITEM BY THE UNIT PRICE FOR THE TOTAL FEE. IT IS THE RESPONSIBILITY OF THE APPLICANT TO INCLUDE AND STATE ALL WORK BEING PERFORMED ON THE PERMIT APPLICATION. **MINIMUM PERMIT FEE IS $70.00.**

PLUMBING CONTRACTOR REGISTRATION FEE: $26.00

FEE SCHEDULE		
DESCRIPTION	**QTY.**	**FEE**
Backflow Preventer[1]		$27.00
Backwater Check Valve		21.00
Bathtub		15.00
Dental Chair		15.00
Dishwasher		15.00
Disconnect Lawn Sprinkling Backflow Preventer		27.00
Drinking Fountain		15.00
Floor Drain		15.00
Garbage Disposal		15.00
Grease Trap		21.00
Humidifier		15.00
Ice Maker		15.00
Laundry Tray		15.00
Lavatory (sink in bathroom)		15.00
Lawn Sprinkling Backflow Preventer[1]		27.00
Medical Gas (Each System)		27.00
Medical Gas – Vacuum Pump		40.00
Medical Gas – Air Compressor		40.00
Pump & Water Lift		27.00
Roof Sump		15.00
Safe Waste		15.00
Shower Trap		15.00
Sill Cock/Hose Bib each		15.00

FEE SCHEDULE		
DESCRIPTION	**QTY.**	**FEE**
Sink (Other Than Bathroom/Bar)		$15.00
Sink, Bar		27.00
Soda Fountain		27.00
Stacks, Conductor, Vents, AAV		21.00
Sump		27.00
Urinal		15.00
Washer, Automatic, Standpipe		15.00
Water Closet (toilet)		15.00
Water Heater		15.00
Water Distribution ¾ inch		21.00
Water Distribution 1 inch		27.00
Water Distribution 1 ¼ inch		27.00
Water Distribution 1 ½ inch		40.00
Water Distribution 2 inch		40.00
Water Distribution 2 ½ inch		46.00
Water Distribution 3 inch		59.00
Water Distribution 4 inch		65.00
Water Distribution Over 4 inch		78.00
Water Treatment Device		34.00
Weeping Tile Trap & Inside Drain		34.00
Unlisted Fixtures		27.00

NOTES:

1. **DEVICE REQUIRES TESTING PRIOR TO APPROVAL.**

IX. INSTRUCTIONS FOR COMPLETING APPLICATION

GENERAL: PLUMBING WORK SHALL NOT BE STARTED UNTIL THE APPLICATION FOR PERMIT HAS BEEN FILED WITH THE BUILDING DEPARTMENT AND ALL FEES ARE PAID. ALL INSTALLATIONS SHALL BE IN CONFORMANCE WITH THE STATE PLUMBING CODE. **NO WORK SHALL BE CONCEALED UNTIL IT HAS BEEN INSPECTED, TESTED AND APPROVED.** WHEN READY FOR AN INSPECTION, PLEASE TELEPHONE THE INSPECTION REQUEST HOTLINE NUMBER: 248-246-3234. YOU WILL NEED THE JOB LOCATION, PERMIT NUMBER AND TYPE OF INSPECTION. ALL CODE QUESTIONS MAY BE DIRECTED TO THE PLUMBING INSPECTOR AT 248-246-3222. OFFICE HOURS ARE: 8AM-9AM AND 4PM-5PM.

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 HAS 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 CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND/OR CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REFUNDED OR REINSTATED. THE PERMIT HOLDER SHALL SCHEDULE ALL INSPECTIONS IN A TIMELY MANNER.**

X. TESTING REQUIREMENT

TESTING OF THE DRAIN, WASTE, VENT, WATER DISTRIBUTION AND MEDICAL GAS SYSTEMS SHALL BE REQUIRED PRIOR TO APPROVAL. ALL TESTING SHALL BE PERFORMED IN THE PRESENCE OF THE PLUMBING INSPECTOR.

THE APPLICANT DOES AGREE TO SCHEDULE AND PERFORM ALL NECESSARY TESTING OF THE PLUMBING SYSTEMS OR COMPONENTS IN THE PRESENCE OF THE PLUMBING INSPECTOR.

The City of Royal Oak will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, handicap or political beliefs.

Effective 6-16-09