



**Bainbridge Township  
Berrien County, Michigan**

7315 Territorial Road, Watervliet, MI 49098  
Phone: 269-468-8040/Fax: 269-468-3498

Andrew Gardiner, Supervisor,  
Patty Hiler-Molter, Clerk  
Nancy Weber, Treasurer

**APPLICATION  
NEW HOMES & ADDITIONS**

**The application for New Homes & Additions shall be submitted through the Building/Zoning Administrator. See “Owner’s Guide”**

**Please read “Owner’s Guide” before filing application(s). attached**

Include the following:

1. Building or Zoning application
2. Site plan
3. Electrical, Plumbing and Mechanical Permit Applications

# *Bainbridge Township*

*Berrien County*

**Ross Rogien, Building Inspector**

7315 Territorial Rd.

Watervliet, MI 49098

616-468-8040

## **PROJECT NOTES FOR ALL BUILDING PROJECTS**

- A. It is the Permit applicant's responsibility to provide all information regarding project location and setbacks from property lines, as well as becoming familiar with all applicable code requirements pertaining to your project. Additionally, per directive from the State Bureau of Construction Codes office, we are required to have on file a copy of the project floor plan(s), foundation, floor, and wall detail, load bearing girder sizes, and load paths for concentrated roof and/or floor loads with support system details for such.
- B. **Property line verification** is the responsibility of the Permit applicant and/or property Owner. The Building Inspector/Zoning Administrator will only verify required set backs from information supplied with the permit application information submitted by the applicant.
- C. Inspections are required for the following: footings and foundations, basement slabs with interior load bearing pads, foundation drains, basement sub grade prior to pouring floors. Framing—before installing insulation and drywall, or siding and roofing shingles. Electrical, Plumbing and Heating systems all require inspection prior to concealing any components. \*Drywall to be inspected prior to taping and finishing to verify condition of board and fasteners.
- D. On POLE BARN Structures—Only approved galvanized fasteners are code approved for any attachments to pressure treated components. Inspections are required for foundation holes, framing prior to installation of sub-sheeting or metal siding over the wall girts, or installation of roof shingles. Indicate header sizes and fastening methods on building plan. Precast concrete pads are NOT acceptable. Verify column loads on large header installations.
- E. Roof loading for our geographic location is now 50# live load, plus dead load, and ceiling and equipment loads where applicable. All attic spaces must be ventilated per code tables for your particular project.
- F. Egress windows are required for basements if no outside stairway or "walk out" condition exists. \*All bedrooms require at least one egress type window.
- G. Homes over 3500 sq. ft. finished area will require review and structural certification by registered design professional. \*\*\*We reserve the right to require project review and engineering data on projects with complex design and loading conditions as noted in the Building Code (regardless of size).
- H. Due to personal liability we cannot offer specific design and load calculations, however, we can approve details and certified documents pursuant to the provisions of the Building Code.
- I. Copies of the Michigan Residential Code and International Building Code (commercial) are available at the township office for your review should you need specific information with regard to your project—copies of specific sections can be made upon request—during regular business hours.
- J. WHEN IN DOUBT-PLEASE CALL A QUALIFIED CONTRACTOR OR BUILDING DEPT. FOR SPECIFIC QUESTIONS ON YOUR PROJECT.

REMINDER TO THE PERMIT APPLICANT—You are responsible for all applicable code requirements on your project—including familiarizing yourself with the code rules prior to starting the project.

# OWNER'S GUIDE

NEW CONSTRUCTION PERMIT(S)-Based on the 2015 Michigan Residential Code. New projects need a Building application along with the following information:

- A. Proof of ownership of property and all taxes up to date.
- B. Outline sketch of property showing road frontage (including name of road), width and length dimensions of parcel and any utility easements.
- C. Any existing structures, well, and septic systems
- D. Location of new home (or addition), well and septic, and showing setback dimensions off property lines. Any other proposed detached structures should be indicated as well.
- E. Show any locations and sizes of berms, swimming pools, fences, or other *substantial* structures or monuments.
- F. County road access permit
- G. Septic permit (for new construction or adding additional bedrooms).
- H. Driveway construction details (width, type of material, thickness of base materials, etc.) Drives are to be min. of 10 ft wide of drivable base materials and clear width between trees or other heavy vegetation of 16 ft.
- I. Building drawings need to include the *following*: Foundation type and outline of the structure. Floor framing system including size and layout of supporting girders & columns. Floor plan layout including *window* and door sizes and header sizes. Staircase locations with riser and tread dimensions. Roof framing system (rafter *size* and layout or truss system) Also, two elevations (*side view*) to show roof style and slope.

\*For additions this would show the proposed tie into the existing roof.

\*If adding a basement under a new addition it must have an Egress Window with area well unless there is one in the existing basement.

\*Any bedroom must have an Egress Window regardless of its location in the home.

It is the owner's responsibility to verify *locations* of County drain easements. Michigan Energy Coder Rules apply for any project.

# BAINBRIDGE TOWNSHIP BUILDING PERMIT APPLICATION

Permit # \_\_\_\_\_

Date \_\_\_\_\_

|                         |  |                 |  |                          |  |                                   |  |
|-------------------------|--|-----------------|--|--------------------------|--|-----------------------------------|--|
| Bldg. Insp. Ph. #       |  | Plan Chk Fee \$ |  | Permit Fee \$            |  | Rec'd by                          |  |
| Job Address             |  |                 |  | New Const.               |  | Extg.                             |  |
| Property Owner's Name   |  |                 |  |                          |  | Prop. Code                        |  |
| Address                 |  |                 |  | City                     |  | State Ph. #                       |  |
| Applicant/Contractor    |  |                 |  |                          |  |                                   |  |
| Address                 |  |                 |  | City                     |  | State                             |  |
| Res. Bldrs. Lic. #      |  |                 |  | Exp. Date                |  | Fax # Ph. #                       |  |
| Fed. Emp. I.D. #        |  |                 |  | Or Reason Not Req'd.     |  |                                   |  |
| Workman's Comp. Carrier |  |                 |  | Or Reason Not Req'd.     |  |                                   |  |
| email address           |  |                 |  |                          |  |                                   |  |
| Class of work           |  | NEW             |  | ADDITION                 |  | ALTERATION                        |  |
|                         |  | REPAIR          |  | MOVE                     |  | OTHER                             |  |
| Describe work: _____    |  |                 |  |                          |  |                                   |  |
| _____                   |  |                 |  |                          |  |                                   |  |
| _____                   |  |                 |  |                          |  |                                   |  |
| Architect               |  |                 |  | Address                  |  | Valuation of work \$              |  |
| Type of Const.          |  |                 |  | Size of Bldg. (sq. ftge) |  | Height of Bldg. (must be to peak) |  |

Special Conditions: \_\_\_\_\_

**PER MRC & MBC: IT IS THE DUTY OF THE PERMIT HOLDER OR THEIR AGENT TO NOTIFY THE BUILDING OFFICIAL THAT WORK IS READY FOR INSPECTION (R109.3 / A110.5)**

| OTHER PERMITS REQUIRED |       |       |
|------------------------|-------|-------|
|                        | REQ'D | REC'D |
| Zoning                 |       |       |
| Health Dept.           |       |       |
| Soil Erosion           |       |       |
| Plumbing               |       |       |
| Mechanical             |       |       |
| Electrical             |       |       |
| Soil Erosion           |       |       |
| Variance               |       |       |
| Other                  |       |       |

"Section 23a of the state construction code act of 1972, Act No. 230 of the Public Acts of 1972, being section 125.1523a of the Michigan Compiled Laws 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 of not less than \$100.00 nor more than \$500.00."

 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Must be signed by all applicants)

## Homeowner's Affidavit

I hereby certify the building work described on this application shall be installed by myself in my own single family dwelling in which I am living or about to occupy. All work shall be installed in accordance with the Michigan Building Code as enforced by Bainbridge Township and shall not be covered up or put into operation until it has been inspected and approved by the Building Inspector. I will cooperate with the Building Inspector and assume the responsibility to arrange for necessary inspections.

Homeowner's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**ZONING PERMIT APPLICATION**

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

**PLEASE PRINT:**

Property Owner: \_\_\_\_\_ Street/City: \_\_\_\_\_

Job Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Number: 11-01- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Zoning District: \_\_\_\_\_

**CONTRACTOR INFORMATION**

Contractor Name (DBA): \_\_\_\_\_ Phone: \_\_\_\_\_

License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Federal Employer Number: \_\_\_\_\_

Worker Compensation Insurance Carrier: \_\_\_\_\_

MESC Employer Number: \_\_\_\_\_ Email: \_\_\_\_\_

**WORK TO BE DONE:**

\_\_\_\_\_ New \_\_\_\_\_ Addition \_\_\_\_\_ Alteration \_\_\_\_\_ Repair \_\_\_\_\_ Demolish \_\_\_\_\_ Move/Other  
Submit copies of: \_\_\_\_\_ Plot Plan \_\_\_\_\_ Bldg. Plan \_\_\_\_\_ Sewage Plan \_\_\_\_\_ Soil Erosion Permit

\*Driveways 300' or longer must have 16' clear path, with a 12' width x 6" thick base material.

Building Detail: \_\_\_\_\_ Height \_\_\_\_\_ Width \_\_\_\_\_ Length \_\_\_\_\_ Stories \_\_\_\_\_ Square Ft.

Set Backs: \_\_\_\_\_ Front \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side

Estimated Cost of Construction: \$ \_\_\_\_\_

**APPLICANTS SIGNATURE: \_\_\_\_\_**

"Section 23A of the State Construction Codes Act of 1972 , Act No. 230 of the Public Acts of 1972, being section 125.1523a of the Michigan Compiled Laws 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 of not less than \$100.00 nor more than \$500.00."

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_ (Must be signed)

**HOMEOWNERS AFFIDAVIT: For Agriculture Farm Exemption Only**

I hereby certify the building work described on this zoning application shall be installed by me on my property which is zoned agriculture and that the structure will be for agricultural use. All work shall be installed in accordance with the Michigan Building Code as adopted by Bainbridge Township. No required building permit or inspection.

Signature of Homeowner: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Special Conditions: \_\_\_\_\_

Permit No.: \_\_\_\_\_

Zoning Admin.— ROSS ROGIEN

Phone # for Inspections: 269-468-8040/ leave message in mailbox 14

Permit Fee: \_\_\_\_\_

Permit Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt #: \_\_\_\_\_

**ELECTRICAL PERMIT APPLICATION  
BAINBRIDGE TOWNSHIP  
RON KETELHUT, ELECTRICAL INSPECTOR  
269-468-5341**

**E 2019**

|                                                                                                                       |                                                                                                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Authority:</b> 1972 PA 230<br><b>Penalty:</b> Failure to provide information may result in denial of your request. | LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities. |
|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**I. Project or Facility Information**

|                                                                                                                                                                 |            |                                                                                                                                                         |                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| NAME OF OWNER/AGENT                                                                                                                                             |            | HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required |                                      |
| STREET ADDRESS & JOB LOCATION (Street Number and Name)                                                                                                          | CITY       | ZIP CODE                                                                                                                                                | COUNTY                               |
| NAME OF CITY, VILLAGE OR TOWNSHIP WHICH JOB IS LOCATED                                                                                                          |            |                                                                                                                                                         |                                      |
| <b>II. Applicant/Facility Contact Information</b><br>(indicate who applicant is)<br><input type="checkbox"/> Licensee/Contractor <input type="checkbox"/> Owner | NAME       | STATE LICENSE#                                                                                                                                          | EXPIRATION DATE                      |
| ADDRESS                                                                                                                                                         | CITY/STATE | ZIP CODE                                                                                                                                                | POWER COMPANY / WORK ORDER           |
| FEDERAL EMPLOYER ID NUMBER (or reason for exemption)                                                                                                            |            |                                                                                                                                                         | PHONE/FAX (please include area code) |
| WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption)                                                                                                |            |                                                                                                                                                         | UIA NUMBER (or reason for exemption) |

**III. Type of Job**

|                                        |                                     |                                             |                                                                      |                                                           |
|----------------------------------------|-------------------------------------|---------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New        | <input type="checkbox"/> Service Only       | <input type="checkbox"/> Premanufactured Home Setup (State Approved) | <input type="checkbox"/> Pole Barn/Garage<br>(circle one) |
| <input type="checkbox"/> Other         | <input type="checkbox"/> Alteration | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home)   | <input type="checkbox"/> Farm                             |

**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:**

1. When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area.
2. 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 rating of the service or feeder in ampere? \_\_\_\_\_

What is the building size in square footage? \_\_\_\_\_

**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.

|                                                                                                                                                                                                                                                                                                                                               |      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| <b>Applicant Signature</b> <span style="float: right;"><input type="checkbox"/></span>                                                                                                                                                                                                                                                        |      |
| <b>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.</b> |      |
| SIGNATURE OF LICENSEE OR OWNER                                                                                                                                                                                                                                                                                                                | DATE |

**Please Complete Application on Back Side**

**Item #17, Mobile Home Unit Site:**

When installing a site service in a park, the permit application must include the application fee, service, the number of park sites and a final inspection. When setting a HUD mobile home in a park, a permit must include the application fee, service, feeder and a final inspection. These shall be done by a licensed electrical contractor. When setting a HUD mobile home or a premanufactured home on private property, a permit must include the application fee, service, feeder and a final inspection.

|                                            | Fee     | # Items | Total   |                                                                                                        | Fee        | # Items | Total   |
|--------------------------------------------|---------|---------|---------|--------------------------------------------------------------------------------------------------------|------------|---------|---------|
| 1. Application Fee (non-refundable)        | \$75.00 | 1       | \$75.00 | K.V.A., H. P., Wind Turbines, ***EVSE and ****PV Modules                                               |            |         |         |
| Service                                    |         |         |         | 19. Units up to 20 K.V.A. or H.P./Per PV Module                                                        | \$6.00     |         |         |
| 2. Through 200 Amp.                        | \$10.00 |         |         | 20. Units 21 to 50 K.V.A. or H.P./Per PV Module                                                        | \$10.00    |         |         |
| 3. Over 200 Amp. thru 600 Amp.             | \$15.00 |         |         | 21. Units > 50 K.V.A. or H.P. /Per PV Module                                                           | \$12.00    |         |         |
| 4. Over 600 Amp. thru 800 Amp.             | \$20.00 |         |         | Fire Alarm Systems (not smoke detectors)                                                               |            |         |         |
| 5. Over 800 Amp. thru 1200 Amp.            | \$25.00 |         |         | 22. Up to 10 devices                                                                                   | \$50.00    |         |         |
| 6. Over 1200 Amp. (GFI only)               | \$50.00 |         |         | 23. 11 to 20 devices                                                                                   | \$100.00   |         |         |
| 7. Circuits                                | \$5.00  |         |         | 24. Over 20 devices                                                                                    | \$5.00 ea. |         |         |
| 8. Lighting Fixtures/Outlets - per 25      | \$6.00  |         |         | Data / Telecommunication Outlets                                                                       |            |         |         |
| 9. Dishwasher                              | \$5.00  |         |         | 31. 1 - 19 devices                                                                                     | \$5.00 ea. |         |         |
| 10. Furnace - Unit Heater                  | \$5.00  |         |         | 32. 20 - 300 devices                                                                                   | \$100.00   |         |         |
| 11. Electrical - Heating Units (baseboard) | \$4.00  |         |         | 33. Over 300 devices                                                                                   | \$300.00   |         |         |
| 12. Power Outlets (ranges, dryers, etc.)   | \$7.00  |         |         | Energy Management Temp. Control                                                                        |            |         |         |
| Signs                                      |         |         |         | 25. Energy Retrofit - Temp. Control                                                                    | \$45.00    |         |         |
| 13. Unit                                   | \$10.00 |         |         | 34. Devices - Energy Management                                                                        | \$5.00 ea. |         |         |
| 14. Letter (each)                          | \$15.00 |         |         | 26. Conduit only or grounding only                                                                     | \$45.00    |         |         |
| 15. Neon - each 25 feet                    | \$20.00 |         |         | Inspections                                                                                            |            |         |         |
| 16. Feeders-Bus Ducts, etc. - per 50'      | \$6.00  |         |         | 27. Special Insp. (pertaining to sale of building) (does not include an electrical service inspection) | \$75.00    |         |         |
| 17. Mobile Home Park Site*                 | \$6.00  |         |         | 28. Rough/Additional Inspection                                                                        | \$75.00    |         |         |
| 18. Recreational Vehicle Park Site         | \$4.00  |         |         | 29. Final Inspection                                                                                   | \$75.00    | 1       | \$75.00 |
|                                            |         |         |         | 30. Certification Fee**                                                                                | \$30.00    |         |         |

\* See VII. Fee Schedule Item #17 above

\*\* Required for all school and state-owned construction projects

\*\*\* EVSE - Electrical Vehicle Supply Equipment

\*\*\*\* PV Modules - Photovoltaic

NOTE: Under special circumstances the Township 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.)

**VIII. Instructions for Completing Application**

**Make checks payable to "BAINBRIDGE TOWNSHIP"**

**General:** Electrical work shall not be started until the application for permit has been filed with the Bainbridge Township Electrical Inspector. All installations shall be in conformance with the Michigan Electrical 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. **Schedule permitting, an inspector will respond to an inspection request within 2 business days to schedule the inspection. The inspector will typically perform the inspection within 5 business days as his or her schedule permits.**

**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 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00.**

All applications (including applicable drawings and specifications) are to be mailed directly to the Bainbridge Township Electrical Inspector.

**VALIDATION AREA**

**MAKE CHECKS PAYABLE TO:**  
**Bainbridge Township**

**MAIL TO:**

**Ron Ketelhut**  
**P.O. Box 809**  
**Watervliet, Michigan 49098**

# PLUMBING PERMIT APPLICATION

## BAINBRIDGE TOWNSHIP

Ken Benjamin, Plumbing Inspector

Phone (269) 876-2272

P 2013 P

Authority: 1972 PA 230  
Completion: Mandatory to obtain permit  
Penalty: Permit can not be issued

### I. Job Location

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

### II. Contractor/Homeowner Information

|                                                                                                                                                                                               |                                                      |                           |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------|-----------------|
| INDICATE WHO THE APPLICANT IS<br><input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner<br><input type="checkbox"/> Master <input type="checkbox"/> Water Treatment Installer | NAME OF PLUMBING CONTRACTOR OR HOMEOWNER             | CONTRACTOR LICENSE NUMBER | EXPIRATION DATE |
| ADDRESS (Street No. 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)                                                                                                                              | MESC EMPLOYER NUMBER (or reason for exemption)       |                           |                 |
| NAME OF MASTER PLUMBER                                                                                                                                                                        | MASTER LICENSE NUMBER                                | EXPIRATION DATE           |                 |
| BUSINESS/BRANCH ADDRESS                                                                                                                                                                       | CITY                                                 | STATE                     | ZIP CODE        |

### III. Type of Job

|                                        |                                     |                                             |                                                                    |                                                                      |                                      |
|----------------------------------------|-------------------------------------|---------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New        | <input type="checkbox"/> Sewer Only         | <input type="checkbox"/> Water Service Only                        | <input type="checkbox"/> Premanufactured Home Setup (State Approved) | <input type="checkbox"/> State Owned |
| <input type="checkbox"/> Other         | <input type="checkbox"/> Alteration | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home) | <input type="checkbox"/> School                                      |                                      |

### IV. Plan Review Required

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:

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 official to be of a minor nature.
3. Buildings with a required plumbing fixture count less than 12.
4. 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."

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.

Plan Review Submission 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 PLUMBING CONTRACTOR, MASTER PLUMBER, WATER TREATMENT INSTALLER, OR HOMEOWNER (Homeowner's signature indicates compliance with Section VI. Homeowner Affidavit) \_\_\_\_\_ DATE \_\_\_\_\_

### VI. 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 State Plumbing Inspector. I will cooperate with the State Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

Complete Application on Back Side

### VIIa. Fee Clarification

**Item #2, Mobile Home Unit Site:** WHEN item is used for sewer excavations in a new park, the permit application should include the application fee plus the number of unit sites. WHEN setting a mobile home in a park, or a mobile or **modular** home on private property, a permit should include the application fee, a sewer or building drain, and a water service or water distribution pipe.

**VIIb. Fee Clarification (continued)**
**Item #3, Fixtures, Floor Drains, Special Drains, and Water Connected Appliances Include:**

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

**Plus Any Other Fixture, Drain, or Water Connected Appliance Not Specifically Listed**

**Item #25, Domestic Water Treatment And Filtering Equipment:** A license is not required for the installation of domestic water treatment and filtering equipment that requires modification to an existing cold water distribution supply and associated water piping in buildings if a permit is secured, required inspections performed, and the installation complies with the applicable code. If the enforcing agency determines a violation exists, it shall be corrected by the responsible installer. The permit application shall include the application fee, the number of water treatment devices recorded in item #25 for \$5.00 each, and the appropriate water distribution pipe (system) size fee.

**VIII. Fee Chart** – Enter the number of items being installed, multiply by the unit price for total fee.

|                                                                       | FEE         | # ITEMS | TOTAL   |                                                                    | FEE         | # ITEMS | TOTAL           |
|-----------------------------------------------------------------------|-------------|---------|---------|--------------------------------------------------------------------|-------------|---------|-----------------|
| 1. Application Fee (non-refundable)                                   | \$75.00     |         | \$75.00 | Watering Distributing Pipe (system)                                |             |         |                 |
| 2. Mobile Home Park Site *                                            | \$5.00 each |         |         | 14. 3/4" Water Distribution Pipe                                   | \$5.00      |         |                 |
| 3. Fixtures, floor drains, special drains, water connected appliances | \$5.00 each |         |         | 15. 1" Water Distribution Pipe                                     | \$10.00     |         |                 |
| 4. Stacks (soil, waste, vent and conductor)                           | \$3.00 each |         |         | 16. 1-1/4" Water Distribution Pipe                                 | \$15.00     |         |                 |
| 5. Sewage ejectors, sumps                                             | \$5.00 each |         |         | 17. 1-1/2" Water Distribution Pipe                                 | \$20.00     |         |                 |
| 6. Sub-soil drains                                                    | \$5.00 each |         |         | 18. 2" Water Distribution Pipe                                     | \$25.00     |         |                 |
| Water Service                                                         |             |         |         | 19. Over 2" Water Distribution Pipe                                | \$30.00     |         |                 |
| 7. Less than 2"                                                       | \$5.00      |         |         | 20. Reduced pressure zone back-flow preventer                      | \$5.00 each |         |                 |
| 8. 2" to 6"                                                           | \$25.00     |         |         | 25. Domestic water treatment and filtering equipment <b>only**</b> | \$5.00      |         |                 |
| 9. Over 6"                                                            | \$50.00     |         |         | 26. Medical Gas System                                             | \$45.00     |         |                 |
| 10. Connection (bldg. drain – bldg. sewers)                           | \$5.00      |         |         | Inspections                                                        |             |         |                 |
| Sewers (sanitary, storm, or combined)                                 |             |         |         | 21. Special/Safety Insp. (includes cert. fee)                      | \$75.00     |         |                 |
| 11. Less than 6"                                                      | \$5.00      |         |         | 22. Additional Inspection                                          | \$75.00     |         |                 |
| 12. 6" & Over                                                         | \$25.00     |         |         | 23. Final Inspection                                               | \$75.00     |         | <b>\$ 75.00</b> |
| 13. Manholes, Catch Basins                                            | \$5.00 each |         |         | 24. Certification Fee                                              | \$30.00     |         |                 |

\* See VIIa. Fee Clarification, Item #2 on front

\*\* See VIIb. Fee Clarification, Item #25 above

**Total Fee** (Must include the \$75.00 non-refundable application fee)

**IX. Instructions for Completing Application**

**General:** Plumbing work shall not be started until the application for permit has been filed with the Bureau of Construction Codes & Fire Safety. All installations shall be in conformance with the Michigan Plumbing 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:** The Bureau of Construction Codes & Fire Safety is responsible for code enforcement in units of government throughout the state which have no local program and for all state owned buildings. Permit applications for state issued permits should be sent to the address on the front of this application. If you are not sure whether a state permit or a local permit is appropriate, contact our office or your local building inspector. Questions regarding state issued permits may be directed to the Office of Management Services, Permit Section at 517-241-9313. Code questions may be directed to the Plumbing Division at 517-241-9330.

Mail to:

Make Checks Payable to:  
**BAINBRIDGE TOWNSHIP**

Ken Benjamin  
6905 Island Ct  
Coloma, MI 49038

The Department of Labor & Economic Growth 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.

# Mechanical Permit Application

Bainbridge Township

Ken Jewell

Phone: 269-287-0425

M 2019

|                                                      |                                                                                                                                                         |
|------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| NAME OF OWNER/AGENT                                  | HAS A BUILDING PERMIT BEEN OBTAINED FOR THIS PROJECT?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required |
| STREET ADDRESS & JOB LOCATION (Street Number & Name) | CITY / ZIP / COUNTY                                                                                                                                     |

## CONTRACTOR / HOME OWNER INFORMATION

|                                                                                           |                        |                                                      |                |                 |
|-------------------------------------------------------------------------------------------|------------------------|------------------------------------------------------|----------------|-----------------|
| INDICATE APPLICANT<br><input type="checkbox"/> Licensee<br><input type="checkbox"/> Owner | NAME OF OWNER/LICENSEE | 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) |                |                 |
| CONTRACTOR'S NAME                                                                         |                        | CONTRACTOR E-MAIL                                    |                |                 |
| WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption)                          |                        | UIA NUMBER (or reason for exemption)                 |                |                 |

## I. TYPE OF JOB

|                                        |                                     |                                             |                                  |                                      |
|----------------------------------------|-------------------------------------|---------------------------------------------|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New        | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> LP Tank | <input type="checkbox"/> State Owned |
| <input type="checkbox"/> Other         | <input type="checkbox"/> Alteration | <input type="checkbox"/>                    |                                  | <input type="checkbox"/> School      |

## II. 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:

1. One-and two-family dwellings when the total building heating/cooling system input rating is 375,000 Btu's or less.
2. Alterations and repair work determined by the mechanical official to be of a minor nature.
3. Business, mercantile, and storage buildings having HVAC equipment only, with one fire area and not more than 3,500 square feet.
4. 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

☐

## III. 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 LICENSED CONTRACTOR OR OWNER (Homeowner's signature indicates compliance with Section VI Homeowner Affidavit)

DATE

**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:** **SHOULD NOT BE CHARGED.** Replacement systems should be itemized.

**Item #4, Residential Boiler:** A residential boiler must be installed by a licensed boiler installer.

**Items #14 & #15, Tanks:** A homeowner must own tank to install. If homeowner does not own tank, a licensed mechanical contractor must install tank.

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

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 fee)

**Make checks payable to "BAINBRIDGE TOWNSHIP"**

### VIII. INSTRUCTIONS FOR COMPLETING APPLICATION

**General:** Mechanical work shall not be started until the application for permit has been filed with the Bainbridge Township Mechanical Inspector. 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.** *Schedule permitting, an inspector will respond to an inspection request within 2 business days to schedule the inspection. The inspector will typically perform the inspection within 5 business days as his or her*

**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 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. **A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED. THE CHARGE TO RE-OPEN A CLOSED PERMIT IS \$75.00.**

**Where to Submit:** Permit Applications shall be sent to the address listed on the front of this application. Code questions may be directed to the Mechanical Division at 517-241-9325.

**MAKE CHECKS PAYABLE TO:  
BAINBRIDGE TOWNSHIP**

**MAIL TO:**  
**Ken Jewell**  
**1349 Maple Lane**  
**Benton Harbor, MI 49022**