## Tecunsch Township

Lenawee County, Michigan

| Authority: AC. 230 of 1972  | BUILDING FERM                  | · · · · · ·   | Application date:          |  |  |  |  |  |  |  |
|---|--------------------------------|---|----------------------------|--|--|--|--|--|--|--|
| As Amended Completion: Installation shall no be started until an application is | ot Da. Rav                     | 172 W MICH AVE<br>P.O. BOX G.<br>CLINTON, MICH 49236            |                            |  |  |  |  |  |  |  |
| filled.<br>Penalty: Written order to stop w                                     | Building Inspector Cell<br>ork | CLINTON, Mich. 49236 Building Inspector Cell Phone 734-657-4353 |                            |  |  |  |  |  |  |  |
|   | TEO#                           | TE0 #   |                            |  |  |  |  |  |  |  |
| I. JOB LOCATION   |                                |   |                            |  |  |  |  |  |  |  |
| Name of Owner / Agent   |                                | Zon   | Zoning District            |  |  |  |  |  |  |  |
| Address (Street number and nar  | me)                            | Contact i   | Contact Phone Number       |  |  |  |  |  |  |  |
| Cross Street  | Const type                     | Use Co  | de                         |  |  |  |  |  |  |  |
| Sewer#  | Culvert #                      |   | rage Size<br>eched ? Y N   |  |  |  |  |  |  |  |
| Other perlinent Information   |                                | ę proces  | W                          |  |  |  |  |  |  |  |
| L CONTRACTOR/HOME   | OWNER INFORMATION (Permit app  | dication MIST he cinned)  |                            |  |  |  |  |  |  |  |
| Contractors / Homeow  |                                | Parecette and anteres a new careful                             |                            |  |  |  |  |  |  |  |
|   | licant? (Check appropriate box | ) State License Number  | Expiration Date:           |  |  |  |  |  |  |  |
|   | Homeowner                      |   |                            |  |  |  |  |  |  |  |
| Address (Street n   | umber and Name:                | State Registration Numb   | er Local Lic. Jurisdiction |  |  |  |  |  |  |  |
| ity State   | Zip Code                       | Local License Number  | Expiration Date:           |  |  |  |  |  |  |  |
| one Number  | Cell Phone Number              | MESC Employer Number  |                            |  |  |  |  |  |  |  |
| orkers Compensation Insuran   | ce Carrier                     | Federal Employer Number   | Federal Employer Number    |  |  |  |  |  |  |  |
| . Construction Details  |                                |   |                            |  |  |  |  |  |  |  |
| oting Depth ===>>   | Footing Width ===>>            | Footing Thickness =>  |                            |  |  |  |  |  |  |  |
| Basement  | First floor joists ====>>      | Spacing   | Span                       |  |  |  |  |  |  |  |
| Crawl Space   | Second floor joists ==>>       | Spacing   | Span                       |  |  |  |  |  |  |  |
| Blocks  | Ceiling joists =====>>         | Spacing   | Span                       |  |  |  |  |  |  |  |
| Poured  | Rafters =========>>            | Spacing   | Span                       |  |  |  |  |  |  |  |
| Waterproofing   | Roof Sheathing                 | Beams   | Siding                     |  |  |  |  |  |  |  |
| eplaces ====>>  | Felt Lbs ==>>                  | Insulation walls  | Brick                      |  |  |  |  |  |  |  |
| drooms ====>>   | Shingles                       | Insulation ceiling  | Brick veneer               |  |  |  |  |  |  |  |
| hs ======>>   | Sub Finish Floor               | Exterior sheathing  | Corner bracing             |  |  |  |  |  |  |  |
| Other Other   | Interior finish paneling       | Corner Bracing  |                            |  |  |  |  |  |  |  |
| Fence   | Fence height                   | Fence Lineal feet   |                            |  |  |  |  |  |  |  |
| lain "Other"  |                                |   |                            |  |  |  |  |  |  |  |
|   |                                |   |                            |  |  |  |  |  |  |  |
|   |                                |   |                            |  |  |  |  |  |  |  |
|   |                                |   |                            |  |  |  |  |  |  |  |

### Homeowner Affidevit Licensee I hereby verify the Building work described on this permit Section 28a of the State Construction Code Act of 1972. Act Hc 239 of the application shall be installed by myself in my home, in which I am Public Acts of 1972, being section 125.1523a of the Michigan Compiled Laws, living or about to occupy. All work shall be installed in accordance prohibits a person from circumventing the licensing requirements of this state with the State Building Code and shall not be enclosed, covered relating to persons who are to perform work on a residential building or a up, or put into operation, or occupied until it has been inspected residential structure. Violators of this section are subject to civil fines. and approved by the Building Inspector. I will cooperate with the Building Inspector and assume to responsibility to arrange As the contractor I will cooperate with the Building Inspector and assume for the necessary inspections. the responsibility to arrange for the necessary inspections. Applicant Signature \_\_ Signature of Licenses or Homeowner (Homeowner signature indicates compliance with Homeowner Affidavit above) Tecumseh Township reserves the right to use an outside firm or agency to conduct plan reviews for the purpose of establishing code compliance. The applicant will be responsible for any fees charged by the firm or agency along with any administrative expenses incurred. Work shall not be started until the application for a permit has been filed with the Building dept. Installation shall be in conformance with the State Building Code - No work shall be concealed until after inspection. Requests for refunds must be made within one year of the date of issuance of a permit, subject to the following Refunds \$ 75 cc admin fee plus an amount equal to the inspection fee for each insp prior to cancellation Cancellations Are non-refundable Review fees In the event work is started prior to obtaining approval of a permit application, a supplemental Work started without a permit fee of \$ 50.00 will be added to the permit fee.If violation are cited or access is denied, a re-inspection fee shall be charged. All fees shall be paid prior to a Certificate of Occupancy being issued. Permits that have expired after six (6) months will be re-issued at one half (1/2) the original permit fee if the amount is less than \$ 100.00. If the permit fee is greater than \$ 100.00, a fee of \$ 50.00 or 10% of the original permit fee whichever is greater shall be paid prior to continuing any work. A cancelled permit can not be reinstated. must show proof of State of Michigan license and register with TECUMSEH TOWNSHIP Contractors ====>> PURSUANT TO THE ABOVE SHALL BE PAID IN ADVANCE WHEN THE APPLICATION IS All Fees: SUBMITTED TO TECUMSEH TOWNSHIP Final Inspections Shall be Called For Plot plan (Show location and dimensions of existing and proposed new construction) NORTH Ε S 3 Sets of prints received . Zoning Approved: Date Building Approved: Date Building Final 5: Certificate of Occupancy: 9/18/2008 Ferrinii Daie Revision:

V. AFFLIDART AGEATUFG

### Tecumseh Township

1 3 2 3 2

Lenawee County, Michigan

| Dlunkun  | INSPECTOR RYA  | N UISZLWSKI  | 19 - 461 - 7305  |  |  |  |
|--|--|--|--|--|--|--|
| Authority: AC. 230 of 1972   | I PLUMBING PERMIT  | Application date:  |  |  |  |  |
| As Amended   | P.O. Box G   | Ave  | D 2 #  |  |  |  |
| Completion: Installation shall not   | DO Rox G   |  | Permit #   |  |  |  |
| be started until an application is   | CLINTON, MICH 492  | <b>36</b>  | Final Date:  |  |  |  |
| filed.   | CCIDTON . MICA   |  | i iliai suto.  |  |  |  |
| Penalty: Written order to stop work  | 754-657-4353 R   | in allegion in   | -  |  |  |  |
|  | TEO#   |  | The state of the s |  |  |  |
| 1. Job Location  | TE0 / property Number  | Has a building permit be   | een obtained?  |  |  |  |
| Name of Owner / Agent  | 1E0 / property Trumbor   | Yes No Not   | Required   |  |  |  |
| (Olympia under and pama)   |  | Contact Phone N  | lumber   |  |  |  |
| Address (Street number and name)   |  |  |  |  |  |  |
| N CONTRACTOR/HOMEOWN   | ER INFORMATION (Permit applies   | afion MUST be signed)  | Translation Date:  |  |  |  |
| ls Applicant   | ? (Check appropriate box)  | State License Number   | Expiration Date.   |  |  |  |
| Contractor Home  | owner  |  |  |  |  |  |
| Name:  |  | State Registration Number  | Local Lic. Jurisdiction  |  |  |  |
| Address (Street numbe  | r and Name:  | State Registration Number  |  |  |  |  |
|  |  | Local License Number   | Expiration Date:   |  |  |  |
| City State   | Zip Code   | Local Floring Name   |  |  |  |  |
| Phone Number   | Cell Phone Number  | MESC Employer Number   |  |  |  |  |
| Phone Number   |  |  |  |  |  |  |
| Workers Compensation Insurance Ca  | rrier  | Federal Employer Numbér  |  |  |  |  |
|  |  | A COLUMN DESCRIPTION OF THE SECOND SE |  |  |  |  |
| HINTYRE OF UOB   | TO THE STATE OF TH | Property of home set!  |  |  |  |  |
| Single Family  |  | Pre-manufactured home setu   | o (State approved)   |  |  |  |
| New Home   | Sewer Only   | Manufactured Home setup (H   | UD Mobile Ham  |  |  |  |
| Remodel  | Water scryloc only Special Inspection  |  | School   |  |  |  |
| Addition to home   | Special Inspection   |  | 。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可要性情况表达。<br>1. 可是性情况表达。<br>1. 可是性情况是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是是   |  |  |  |
| IV: Plan Review Required   | cation for plan examination and the appr   | opriate deposit before a permit can be i   | ssued,   |  |  |  |
| Plans nust be submitted with an appli<br>except as listed below:                       | Cattori for plan examination   |  |  |  |  |  |
|  | Plans are not required for   | r the following:   |  |  |  |  |
| 1 One and two family dwellir   | ng containing not more than 3,500 square fo  | eet of building area   |  |  |  |  |
| <ol> <li>Alterations and repair work</li> </ol>  | determined by the Plumbing Official to be  | of a minor nature  |  |  |  |  |
| <ol> <li>Ruildings with a required p</li> </ol>  | lumbing fixture count less than 12.  |  |  |  |  |  |
| 4 Work completed by a gove   | ernmental subdivision or State Agency cost   | ing less than \$15,000.00  |  |  |  |  |
| 15 Liberton norformed  | is described above, check box below "Pi  | lans not required  | or engineer  |  |  |  |
| Plans are required: For all other  | building typesand shall be prepared by or u  | inder the direct supervision of an archicost   |  |  |  |  |
|  | nall bear that architect's or engineer's seal a  | no signature.  | ot required  |  |  |  |
| Plan Review Submission Number:   | AND THE RESIDENCE OF THE PROPERTY OF THE PROPE |  |  |  |  |  |
| APPLICANT SIGNATURE  |  | Homeowner A  |  |  |  |  |
|  | <u>Licensee</u>  | I hereby verify the Plumbing work described on this permit application shall be  |  |  |  |  |
| ection 23a of the State Construction Code act  | of 1972, 1972 PA 230 , MCL 125.1523A,  | be installed by myself in my home, in which I am living or about to occupy. All  |  |  |  |  |
| rohibits a person from conspiring to circumven   | t the licinsing requirements of this State   | work shall be installed in accordance with the Michigan Plumbing Code and  |  |  |  |  |
| elating to persons who are to perform work on  | a residential building of a residential subsidies  | shall not be enclosed, covered up, or put into operation, or occupied until it has   |  |  |  |  |
| iolators of section 23A are subject to civil fines<br>IGNATURE OF PLUMBING CONTRACTOR, | MASTER PLUMBER OR HOME OWNER   | been inspected and approved by the Plumbing Inspector. I will cooperate  |  |  |  |  |
| IGNATURE OF PLUMBING CONTRACTOR.   |  | with the Plumbing Inspector and assume to responsibility to arrange  |  |  |  |  |
| Homeowner's signature indic  | cates compliance with Homeowner Affidavit  | for the necessary inspections.   |  |  |  |  |
| Homeotetic a agriculta inch  | •  | Homeowners Initials ==>  | >  |  |  |  |

| 17.4                         | iarification   |  |                      |                    |  |   | <del></del>                            |   | -                                       |
|------------------------------|--|--|----------------------|--------------------|--|---|--|---|---|
| litem # 2, Mol               | pile Home Unit Site: When  | item is used for se                    | wer excavationns     | in a new park, ti  | he permit applicatio   | n should include                            | the application                        | fee plus the nu                         | ımber                                   |
| of unit sites. V             | Vhen setting a mobile home   | in a park, or mobi                     | le or modular home   | e on private pro   | perty, a permit sho  | uld include the an                          | nlication fee a                        | sewer or buildin                        | no drain, and                           |
| a water service              | e or water distribution pipe.  |  |                      | , F1               | ,, p=,   | an moreon are ap                            | phosion ree, a                         | Sewel of pullan.                        | iệ tranț and                            |
| ltem # 3, Fixtu              | ıres, drains, appliances ir  | iclude:                                |                      | ·                  |  |   | ······································ |   |   |
| Water Closets                | Sink (Any description)   | Stop Sink                              | Drinking Founts      | ain                | Floor Drain  | Notation and a second                       |  |   |   |
| Bathtub                      | Emergency eye wash   | Bidet                                  | Condensate Dra       |                    | Roof Drain   | Water outlet or                             |  |   | ater Jank                               |
| Lavatories                   | Emergency shower   | Cuspidor                               | Washing Machi        |                    | Grease Trap  | Water outlet of                             |  |   |   |
| Shower Stall                 | Garbage grinder  | Dishwasher                             | Acid Waste Dra       |                    | 1  | Water outlet or connection to Filters       |  |   |   |
| Laundry Tray                 | Water outlet cooler  | Refrigerator                           | Embalming Tabl       |                    | Starch Trap  | Connection to Sprinkler System (Irrigation) |  |   |   |
| Urinal                       | ice making machine   | Water Heater                           | Bed Pan Washe        |                    | Plaster Trap   | · · · · · · · · · · · · · · · · · · ·       |  |   |   |
| Autopsy                      | Water connected still  | Tracer steater                         | bed Fall Washe       | :Г                 | H20 softener   | Water connecte                              |  |   |   |
|                              | er Fixture, drain or wa  | ter connected :                        | l<br>Prijanas nata   |                    | Water connection to carbonated beverage dispensers   |   |  |   |   |
| Item#25 Dome                 | estic Water Treatment and  | Elitaria - Carri                       | pphance not s        | pecifically lis    | itea   |   |  |   |   |
| modification to a            | estic Water Treatment and  | riiteling Ednibwet                     | t A license is not   | required for the   | installation of dome   | estic water treatm                          | ent and filtering                      | g equipment tha                         | it requires                             |
| complies with the            | n existing cold water distrib  | ution supply and a                     | ssociated water pip  | ping in buildings  | if a permit is secur   | red, required, insp                         | pections perform                       | ned and the ins                         | tallation                               |
| compiles with the            | applicable code, if the enti-  | orcing agency dete                     | rmines a violation   | exists, it shall b | e corrected by the   | responsible instal                          | ller. The nermit                       | annlications sha                        | all include                             |
| the application le           | e' me umuber of Maret fles.  | imeni devices reco                     | orded in item # 25 i | for \$ 5.00 each : | and the appropriate  | e water distributio                         | n pipe (system)                        | ) size fee.                             |   |
|                              | S  | Line Fee                               |                      |                    |  |   | : tee⊈                                 | Link Sign                               | <b>新加热之影</b> 等                          |
| -                            | ription of Item  | Per Item                               | , Quantity           | Total              | Descripțio   | ń of Item                                   | Për Item                               | Quantity                                | Total                                   |
| 1. Application fee           | e (non-refundable)   | _' ¬5.00 <sub>1</sub>                  | 1                    | 75'00              | 17. Water Dist p   | ipe 1 1/2"                                  | \$20.00                                | 17/10/20 195-005                        |   |
| 2. Mobile home P             | ark Site *   | \$5.00                                 |                      | ĺ                  | 18. Water Dist p   |   | \$25.00                                | نب ــــــــــــــــــــــــــــــــــــ |   |
| 3. Fixtures, Drain           | s, appliances  | \$5,00                                 |                      |                    | 19. Water Dist p   |   | \$30.00                                | THE RESERVE ASSESSMENT ASSESSMENT       |   |
| 4. Stacks (Soil,wa           | ste, vent, cond)   | \$3.00                                 |                      |                    | 20. Reduced Pre  |   | Ψ.υ.υυ                                 |   |   |
| 5. Sewage ejector            | s & Sumps  | \$5.00                                 |                      |                    | i  |   | #C 00                                  |   |   |
| 6. Sub soil drains           |  | \$5.00                                 |                      | <u> </u>           | back flow prever   |   | \$5.00                                 |   |   |
| 7. Water service le          | uce than 2"  |  |                      |                    | 21. Special safet  | - · .                                       | ,                                      |   |   |
|                              | and the second s | \$5.00                                 |                      |                    | (includes Certific   | ztion fee)                                  | 7500                                   |   |   |
| 8. Water service 2'          |  | \$25.00                                |                      |                    | 22. Àdditional Ins   | pections                                    | 75.00                                  |   |   |
| 9. Water service ov          |  | \$50.00                                |                      |                    | 23. Final Inspecti   | on  | 7500                                   | 1                                       | 75.00                                   |
| 10. Conn. (Bldg, dr          |  | \$5.00                                 |                      |                    | 24. Certification f  | ee  | \$20.00                                |   | - ' . '                                 |
| 11 . Sewers less the         | en 6"  | \$5.00                                 |                      |                    | 25. Domestic wat   | er treatment                                | ĺ                                      |   |   |
| 12. Sewers 6" and o          | over   | \$25.00                                |                      |                    | and filtering equip  | only  | \$5.00                                 |   |   |
| 13 . Manholes, catch         | ı basins   | \$5.00                                 |                      | ************       | 26. Medical gas S  |   | \$45.00                                |   | *************************************** |
| 14_ Water Distribution       | on pipe 3/4"   | \$5.00                                 |                      |                    | 27. Underground  |   | 75.CC                                  |   |   |
| 15. Water Distribution       | on pipe 1"   | \$10.00                                |                      |                    | 28. Rough Inspect  |   |  |   |   |
| 16 Water Diet pipe           | 1 1/4"   | \$15.00                                |                      |                    | or readu maheer  | 1011  | 75.00                                  |   |   |
| Ara Application              | fee (Non-Refundabl   |  | d on All Hame        |                    |  | <u>-</u>                                    | Catal E                                |   |   |
| Te cunsel Town               | ship reserves the righ   | of to use an ou                        | toida firm en        | S                  |  |   | otal Fees                              | ===>>                                   |   |
| es fablishing co             | de compliance. The   | n to ase an ou                         | in po recent         | igency to co       | nduct plan rev   | iews for the p                              | ourpose of                             |   | . [                                     |
| an v administrat             | de compliance. The<br>ive expenses incur   | e abbucant M                           | un ne tesponi        | sible for an       | y fees charge  | ed by the firr                              | n or agend                             | y along wif                             | th                                      |
|                              |  |  | C1 47                |                    | -  |   |  | *** *****                               |   |
| Installation shall           | nbing work shall no  | o with the et-                         | untii the appi       | lication for       | a permit has   | been filed w                                | ith the plu                            | mbing dept                              | t.                                      |
| Refunds Req                  | l be in conformanc   | e with the sta                         | te Plumbing          | Code - No          | work shall be  | e concealed                                 | l until after                          | inspection                              |   |
| we railes wed                | nesis ioi telutius ti  | nust be made                           | e within one y       | ear of the         | date of issua  | nce of a per                                | mit subject                            | of to the fol                           | lowing                                  |
| Cancellations<br>Re√iew fees | TIPE au  | ma ree pius a                          | an amount ed         | qual to the        | inspection fe  | e for each ir                               | rsp prior to                           | cancellation                            | on                                      |
|                              | Vie nou-len  | unaable                                |                      |                    |  |   |  |   | 1                                       |
| No rk started witho          |  | the event wo                           | ork is started       | prior to ob        | taining appro  | val of a perr                               | nit applica                            | tion, a sup                             | plemental                               |
| UL -C 1                      | iii de adaed to the i  | оения тее и                            | Viniation are        | ritad or occ       | cess is denie  | d, a re-inspe                               | ection fee :                           | shall be ch                             | arged.                                  |
| 1 ccs shall be               | haid bliot to a celf   | nineare of Oct                         | cupancy bein         | ig issued.         |  |   |  |   | 1                                       |
| XP i red permits             | Permits that   | have expire                            | d after six (6)      | months w           | ill be re-issue  | ed at one ha                                | If (1/2) the                           | original pe                             | ermit fee                               |
| in e amount is f             | cos man y rob.oo.  | n use permit                           | Tee is oreate        | ≥r than ⊈ 10       | 10 00 ര fee c  | v£ ¢ EO OO 👡                                | · 100/ -fib                            | a ariainal n                            | permit                                  |
| Willows Coci 12              | Arearer strait he ha   | an bhot to co                          | ntinuing anv         | Work, A ca         | incelled nerm  | if can not be                               | e reinetafe                            | .d                                      | · •                                     |
| on tractors                  | must show p  | roof of State                          | of Michigan          | license an         | d reaister wit   | h the TCri                                  | LIMS CIL                               | ~.<br>***********                       | CAND                                    |
|                              |  |  |                      |                    |  |   |  | •                                       | - 1                                     |
| IFees: ====                  | =>> PURSUANT   | TO THE AB                              | OVE SHALL            | BE PAID            | IN ADVANC  | E WHEN TH                                   | JE ADDIJA                              | אדוטאו ופ                               |   |
|                              | SUBMITTED  | TO TEC                                 | umseh .              | TOWNS              | 11.7D  | TT 84.1T14 11                               | IL MI I LIV                            | MITONIO                                 | 1                                       |
|                              |  |  | 4 - 0011             | 1 ~ MM 2           | N17  |   |  |   |   |
|                              |  | ······································ | <del></del>          |                    | Ilada  | rarainad                                    | 1                                      |   |   |
|                              |  |  | Date:                |                    | Unde   | erground                                    |  |   |   |
|                              | <del></del>  |  | vale.                | <del></del>        | - Carlo Carl | Rough                                       |  |   |   |
| nit Date Revision:           | 10/30/08   | E                                      |                      |                    |  | Final                                       |  |   |   |
| — ~s //c/10[0]];             | (0/00/00)  |  |                      |                    |  | Special                                     |  |   |   |

### E CARE DE CARE

Lenawee County, Michigan Electricial Inspector Application date: ELECTRICAL PERMIT APPLICATION Authority: AC. 230 of 1972 172 w michigan Ave As Amended Permit # P.O. Box G. Completion: Installation shall not CLIVIEW, MICH be started until an application is Final Date: Thepodork ED ENGLE! 734-657-4363 TE0 # Penalty: Written order to stop work raka like posla kibas i në fike zartizas velis man to the man of the control of the ITUOB LOCATION: Has a building permit been obtained? TE0 / property Number Name of Owner / Agent Not Required No \_ \_\_\_ Contact Phone Number Address (Street number and name) I CONTRACTOR/HOMEOWNER INFORMATION (Permit application MUST be signed) Expiration Date: State License Number (Check appropriate box) Is Applicant? \_ Homeowner Contractor\_ Jame: Local Lic. Jurisdiction State Registration Number Address (Street number and Name: Expiration Date: Local License Number Zip Code State ify MESC Employer Number Cell Phone Number hone Number Federal Employer Number Orkers Compensation Insurance Carrier AN THE RESERVE 国家有关员 TYPE OF JOB 医脱毛 医电影 Other Single Family Well Pump Special inspection New Other Mobile Home Setup Remodel Remodel Modular Home Setup Service Only Addition plain "Other" Fee. Fee: Per Item Quantity Description of Item Total Quantity Pèr Item. Description of Item \$20.00 gle Family Residential \$10.00 Feeders, bus Ducts per 50' s than 3500 sq ft (Plus Base) 300.00° \$10.00 Mobile Home Park Site 75.00 1 ∍e fee (Res) Non-Refundable 75.00 \$6.00 Units up to 20 KVA or HP \$100.00 e Fee (Comm/Ind) Non-refundable \$10.00 75.00 Units 21 - 50 KVA or HP 1 75.00 ) al Inspection \$12.00 Units 51 KVA or HP & Over \$30.00 vice thru 600 Amp \$50,00 Fire Alarms 1 to 10 \$25.00 vice 601 Amp thru 800 Amp \$120.00 Fire Alarms 11 to 20 \$25.00 vice 801 Amp thru 1200 Amp \$6.00 Fire Alarms Over 20 (Ea) \$6.00 uits (Each) 75.00 Special Safety Insp \$6.00 iting Fixtures - Per 25 \$35.00 Spas \$6.00 iwasher, Garbage disposal (Ea) \$30.00 Transfer Switch (Emer Gen) \$6.00 tric Heating units (Baseboard) \$20.00 Well Pump \$8.00 er Outlets (Ranges, Dryers Etc) 75.00 Rough Inspection \$80.00 nming Pools (Inground) \$50.00 Low Voltage Inspection \$60.00 nming Pools (Above Ground) Total Fees ===>> ase Charge is Required on All Items

#### <u>Licensee</u>

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 Complied Laws, prohibits a person from circumventing the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of this section are subject to civil fines.

As the contractor I will cooperate with the Electrical Inspector and assume the responsibility to arrange for the necessary inspections.

#### Homeowner Affidavit

I hereby verify the Electrical work described on this permit application shall be installed by myself in my home, in which I am living or about to occupy. All work shall be installed in accordance with the State Electrical Code and shall not be enclosed, covered up, or put into operation, or occupied until it has been inspected and approved by the Electrical Inspector. I will cooperate with the Electrical Inspector and assume to responsibility to arrange for the necessary inspections.

| Applicant Signat  | ure  |   |
|---|--|---|
| Signature of License  | e or Homeowner (Homeowner signature indica   | Date:   |
| any administrative e  | emphanice. The applicant will be responsible to the sponsibility of the sponsibility o | or agency to conduct plan reviews for the purpose of ole for any fees charged by the firm or agency along with  |
|   | The state relectives C   | cation for a pennit has been filed with the electrical dept.<br>ode - No work shall be concealed until after inspection.  |
| leview fees   | Are non-refundable   | ar of the date of issuance of a permit, subject to the following tall to the inspection fee for each insp prior to cancellation   |
| ull fees shall be paid  | prior to a Certificate of Occupancy being  | rior to obtaining approval of a pennit application, a supplemental ted or access is denied, a re-inspection fee shall be charged. issued.   |
| xpi r ed permits the amount is less th e whichever is greate ntr actors | er shall be paid prior to continuing any wo  | nonths will be re-issued at one half (1/2) the original permit fee an \$ 100.00, a fee of \$ 50.00 or 10% of the original permit onk. A cancelled permit can not be reinstated.  icense and register with the TECUMSEH TOWNSHIP |
| Γ∈υ: ===>>  |  | I. BE PAID IN ADVANCE VITTEN THE ADVACE TO THE  |

# Final Inspections Shall be Called For

Permit Date Revision:

10/24/2008

| Authority: P.A. 230 of 1972 as   | Tecums  | O AALIZIBIH  | Phhilipano   | m date.  |   |  |  |
|--|---|--|--|--|---|--|--|
| Amended  | Lenawee County, MI-   |  |  |  |   |  |  |
| Completion: Installation shall not   | MECHANICAL P  | PERMIT   | APPLICATION  | Permit #   |   |  |  |
| be started until an application is   | 172 W Mic   | 太似的  | Aue  | 9:   |   |  |  |
| filed.   | P.O. Box 9  | P.O. Box G   |  |  |   |  |  |
| Penalty: Written order to stop work  | Cliuron, Mic  | Climon, Mich 49236   |  |  |   |  |  |
|  | TEO# 734-657-6  | <u>4353                                   </u>                   | For Inspections.   |  |   |  |  |
| NOB LOCATION   |   |  | Has a building permi   | boon obtained?   |   |  |  |
| Name of Owner  |   |  | tot Required   | _  |   |  |  |
|  |   |  | Homeowners Ph  |  |   |  |  |
| Address (Street number and name)   |   |  |  |  |   |  |  |
| THEONT PACTOR/HOMEON   | NNER INFORMATION (Permi   | it applic  | ation MUST be signed)  |  |   |  |  |
| is Applic  | ant? (Check appropriate   | e box)   | State License Number   | Expiration I   | Date:                                   |  |  |
| Contractor Ho  | ·   | ·<br>  |  |  |   |  |  |
| Contractor name:   |   |  | Address (St. # and Name:   | Local Licen  | se Number                               |  |  |
| Community Hames  |   |  |  | - · · · · · ·  | lofo.                                   |  |  |
| City State   | Zip Code ·  |  | Federal Employer ID  | Expiration I   | rate:                                   |  |  |
|  |   |  |  |  |   |  |  |
| Phone Number   | Fax Number .  | ļ  | MESC Employer Number   |  |   |  |  |
|  |   |  | Workers Compensation Insurance (   | Carrier  |   |  |  |
| Cell Phone Number  | •   | į  | Workers compensation me  |  |   |  |  |
| ETWENDE 10B  |   |  |  | , degree de la describé  | eri, programa<br>Sa Magazia             |  |  |
|  | New Construction  |  | Special Inspection   |  | LP Tank                                 |  |  |
| Single Family Commercial / Ind.  | Alteration  |  | Manufactured Home  |  | Other                                   |  |  |
| valain "Other"   |   |  |  | 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2  | - C - C - C - C - C - C - C - C - C - C |  |  |
| JEPEAN(REVIEW  | Qty   | Amt :  |  | · · · · · · · · · · · · · · · · · · ·  | Amt                                     |  |  |
| Single Family over 375,000 BT  | U or 3,500 Sq \$1   | 100.00   | Minthle Lan  |  | \$100.0<br>\$200.0                      |  |  |
|  | Commercial \$1  | 150.00   | Indust   |  | \$50.0                                  |  |  |
| Fire   | Suppression \$  | \$75.00  | Hood & Duct Fire Suppression S   | ongineer license   |   |  |  |
| ans are required for all building t  | ypes and shall be prepared by or u                                  | inder the o  | ilrect supervision of an architect or  | fure and seal, ex  | cept                                    |  |  |
| irsuant to ACT No. 299 of the Pub  | lic Acts of 1980, as amended, and s                                 | shall bear   | that architect's or engineer's signa   | \$.  | ·                                       |  |  |
| مرم کم لم مرات می در   | : hy the mechanical inspector                                       | T 50 DH UL   | i (nput rating is 375,000 BTU's or les<br>a minor nature.                        |  |   |  |  |
| Alterations and repair work deter  | simou ny me mechanika ny fisita<br>a buildings baving HVAC equipmet | nt only, w   | ith one fire area and not more than  | 3,500 Sq Ft  |   |  |  |
| Business, mercanthe, and otorag<br>Mark completed by a governmen   | tal subdivision or state agency cos                                 | sting less   | than \$ 15,000   |  | ,                                       |  |  |
|  |   |  |  | ላ ከጦበነለግ ሮ ለአ  | שב ופפוובה                              |  |  |
| ANS MUST BE SUBMITTED IF YO  | U DO NOT QUALIFY FOR ONE OF   | THE EXE  | MPTIONS LISTED ABOVE BEFORE  | A PERIMIT CAM  | DE ROOUED.                              |  |  |
| APPLICANT SIGNATURE  |   | <u> </u>   |  | J. 44 Jan 2 Bar San Care San C | <u>,</u>                                |  |  |
|  | Licensee  |  | Homeowner Affidavit I hereby verify the mechanical work described on this permit |  |   |  |  |
| ction 23a of the State Construction  | Code Act of 1972, Act No 230 of the                                 | <b>Q.</b>  | application shall be installed by myself in my home, in which I am               |  |   |  |  |
| olic Acts of 1972, being section 125   | 1523a of the Michigan Complied Law                                  | 1  | living or about to occupy. All work shall be installed in accordance             |  |   |  |  |
| hiblis a person from circumventing t   | he licensing requirements of this stat                              | l <sub>w</sub>   | with the State Mechanical Code and shall not be enclosed, covered                |  |   |  |  |
| ting to persons who are to perform dential structure. Violators of this se   | action are subject to civil fines.                                  | u  | up, or put into operation, or occupied until it has been inspected               |  |   |  |  |
| dential structure. Violators of this se  | CORDIT DIE SEDICOL LO DIVIL III POU                                 | aı   | and approved by the Mechanical Inspector. I will cooperate with                  |  |   |  |  |
| he contractor I will cooperate with the  | ne Mechanical Inspector and assume                                  | the mechanical inspector and assume to responsibility to arrange |  |  |   |  |  |
| responsibility to arrange for the nec  | essary inspections.   | fo   | r the necessary inspections.   |  | ng-Détagé- <u>nètra marang-n</u> g      |  |  |
| and the same of th |   |  | D-4-1  |  |   |  |  |
| olicant Signature  |   |  | Date:  |  | ·                                       |  |  |
| nature of Licensee or Homeowne   | (Homeowner signature indicates                                      | complian   | ce with Homeowner Affidavit above  | 1  |   |  |  |
| •  |   |  |  |  | <del> </del>                            |  |  |
| umseh Township reserves the ri   | ght to use an outside firm or age:                                  | дву ю со<br>de for an  | nduct plan reviews for the purpos<br>by fees charged by the firm or a            | gency along \  | with                                    |  |  |
| ablishing code compliance. I   | ntred COM   | IPLETE   | THE APPLICATION ON BAC   | <  |   |  |  |
| administrative expenses inc  | urred. COIVI  | ILTEIE   | THE ALLEGATION OF DATE   |  |   |  |  |

MecHANICAL INSpeden Don Olszewski 419-466-7238

| Residential                             | Fee     | Për  |                  | T            |               | Commercial/Indu                  | strial             |                   |                 |          |
|---|---------|--|------------------|--------------|---------------|----------------------------------|--------------------|-------------------|-----------------|----------|
| řes Item                                | jí      | ein  | 推ltèm            | s To         | tal           | fee Item                         | Fee/lte            | em                | # Items.        | Total    |
| Application Fee (Non-refund)            |         | 15° cc   | 1                | 75           | co            | Application fee (Non-refu        | ind) 100           | Ge l              | ĺ               | 100,00   |
| NEW SINGLE FAMILY R                     |         | <u>15 00</u>                                     |                  |              |               | Ductwork Complete Dist           |                    |                   |                 | 7        |
| Replacement Furnace/ductwork            |         | 75.00  |                  |              |               | Add/Alt to existing syster       | n \$50             | .00               |                 |          |
| Furnace Wo ductwork, boiler,unit h      |         | 0.00   |                  |              |               | Unfired steam/not H20 un         | it htr \$50.       | 00                | 1               |          |
| Make up zir unit                        |         | 0.00   |                  |              |               | Water heater > 80,000 inp        | ut \$50.           | 00                |                 |          |
| Ductwork complete distribution sys      |         | 0.00   |                  |              |               | Fire damper                      | \$50.              | 00                |                 |          |
| (Additional/alteration to existing sys) |         | 0.00   |                  |              |               | Each added fire damper           | \$10.              | 00                |                 |          |
| Bath, Kitchen, dryer vent exhaust (ea   | ch) \$1 | 0.00   |                  |              |               | VAV Boxes                        | \$10.              |                   |                 |          |
| Humidifier                              | \$1     | 0.00   |                  |              | 7             | APPROVED MAXIM                   | _ • ·              | ,                 | 375.000 BT      | U PER HR |
| Flue & vent damper                      | \$,     | 7.00   |                  |              |               | urnace, boiler or unit hea       |                    |                   |                 |          |
| Gas water heater or gas logs (each)     | \$10    | 00.0   |                  |              | Ť             | /iake-up air unit                | \$50.0             |                   |                 |          |
| Gas piping only                         | \$25    | .00  |                  |              |               | Vater heaters & boilers          | \$60.0             |                   |                 |          |
| (With additional permit items)          | \$15    | .00  |                  |              |               | wimming pool boilers/htrs        |                    | or winese         |                 |          |
| Air conditioning                        | \$40    | .00  |                  |              | -             | ommercial unit Hfr (Elec h       |                    |                   |                 |          |
| Stean generating boiler                 | \$50.   | 00   |                  |              | -             | 1                                | GAS PIPIN          |                   |                 |          |
| Swimming pool boiler or water heater    | \$35.   | 00   |                  | -            | N             | ew installation                  | \$75.0             | Corporate in      |                 |          |
| Room heater, wall furnace < 50,000 BTL  | \$30.   | 00   |                  |              |               | iditional or extension           | \$50.0             | ححف               |                 |          |
| Infra-Red unit heater, at one location  | \$25.   | 00   |                  |              | -1            | HOOD & DUCT                      |                    |                   | CION EVETI      |          |
| (Each addition! infra red unit heater)  | \$15.0  | 00   |                  |              | - F           | ch established Sys min           | \$50.00            |                   | 31014 0 1 0 1 1 | _ {¥!    |
| Pre-fab fireplace / Cornburners         | \$45.0  | 00   |                  | <del> </del> |               | FIRE SUPPRESSION                 |                    |                   | V YIUDIDE 67    | /CTENA   |
| Chimney liner                           | \$25.0  | 0  |                  | <del> </del> |               | /2 " thru 4"                     | \$50.00            | TO THE OWNER WHEN | ANDEIFES        | O I CIVI |
| Chimney, Factory built installed sep.   | \$25.0  | 0  |                  |              | <del></del>   | er 4"                            | \$75.00            | <u>د سمخ</u>      |                 |          |
| ELECTRIC                                | HEAT IN | STALL  | LATION           |              | }             | pumps/connections (Ea)           | \$20.00            |                   |                 |          |
| E l'ectric central furnace              | \$35.0  |  |                  |              |               | key pumps (Ea)                   | \$20.00            |                   |                 |          |
| Furnace or boiler for central system    | \$35.0  |  |                  |              | <del>-}</del> | Supp protection heads            | \$25.00            |                   |                 |          |
| M a ke up air units                     | \$35.0  |  |                  |              |               | ds over 25                       | \$23.00            |                   |                 |          |
|   | THER FE |  | -                |              | 11162         | Central Air (                    | 1 ' 1              | ina               | ) (EACH)        |          |
| E×1⊃aust or ventilation systems         | \$50.00 |  |                  |              | nso           | rs 1 HP or Less                  | \$40.00            | urig              | ) (EACh)        |          |
| Sp ecial safety inspection              | 75.00   | d  | -                |              | -             |                                  |                    |                   |                 |          |
| Un elerground Gas Inspection            | 75.00   | -  |                  |              | <del></del>   | ral air over the to 5 he         | \$40.00<br>\$45.00 | -                 |                 |          |
| Rough Inspection                        | 75 00   | <del>                                     </del> |                  | <del></del>  | <del>,</del>  | al air over 5hp to 50hp<br>50 hp | \$45.00<br>\$55.00 |                   |                 |          |
| in all inspection                       | 75.00   |  | <del>1  </del> . | 75.00        | ٠             | sool lop or ground               | \$65.00            |                   |                 |          |
| del Itland or Reinspection fee          | 75.00   |  |                  | <u> </u>     | 177           | ess piping                       | \$25.00<br>\$25.00 | <del></del>       |                 |          |
| as pressure test                        | \$25.00 |  | ∤                |              | 1.100         | ess hibitid                      |                    |                   |                 |          |
| )                                       |         | Annlia   | ation for        |              |               | ooting quotage Car               | 1 01               | aı i              | Fees            |          |

INCLUDES Application fee, Residential heating system, Gas piping, A/C,

Bath/kitchen/dryer Exhaust (3), rough inspection, gas pressure test and final inspection Mechanical work shall not be started until the application for a permit has been filed with the mechanical dept. EN ERAL nst allation shall be in conformance with the state Mechanical Code - No work shall be concealed until after inspection.

Requests for refunds must be made within one year of the date of issuance of a permit, subject to the following efur nds \$ 75.00 admin fee plus an amount equal to the inspection fee for each insp prior to cancellation an Cellations ∋vī ⊜w fees Are non-refundable

In the event work is started prior to obtaining approval of a permit application, a supplemental or I started without a permit e of \$ 50.00 will be added to the permit fee.If violation are cited or access is denied, a re-inspection fee shall be charged. fees shall be paid prior to a Certificate of Occupancy being issued.

Permits that have expired after six (6) months will be re-issued at one half (1/2) the original permit fee bir ed permits he amount is less than \$ 100.00. If the permit fee is greater than \$ 100.00, a fee of \$ 50.00 or 10% of the original permit · Whichever is greater shall be paid prior to continuing any work. A cancelled permit can not be reinstated. ıtr⇔ctors

must show proof of State of Michigan license and register with TECUMSEN TOWNSHIP

====>> PURSUANT TO THE ABOVE SHALL BE PAID IN ADVANCE WHEN THE APPLICATION IS SUBMITTED TO TECUMSEH

TOWN SHIP is ion Dates: 10/24/2008