Eaton County Department of Construction Codes 1045 Independence Boulevard, Charlotte, Michigan 48813 Telephone: (517) 543-3004 Fax: (517) 543-9924

"OUR GOAL IS TO PROVIDE A SAFER PLACE TO LIVE, WORK AND PLAY"

CONTRACTOR MECHANICAL PERMIT APPLICATION

EFFECTIVE DATE 01-Jul-2011

Inspector use only

| DATE OF APPLICATION: | MECHANICAL PERMIT #: | | | | | | |
|--|---|--|--|--|--|--|--|
| | THIS IS AN ADDENDUM TO AN OUTSTANDING MECHANICAL PERMIT ISSUED TO ME. | | | | | | |
| COMPLETION: MANDATORY TO OBTAIN A PERMIT BECAUSE | COUNTY WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL OR GROUP FOR RACE, SEX, SEXUAL ORIENTATION, RELIGION, AGE, NATIONAL ORIGIN, STATUS, DISABILITY, OR POLITICAL BELIEFS. | | | | | | |
| Areas marked with a & must be completed IF THIS FORM IS NOT PROPERLY & COMPLETELY FILLED OUT IT WILL DELAY THE ISSUANCE OF THE PERMIT. | | | | | | | |
| A: OTHER PERMITS | | | | | | | |
| HAS A BUILDING PERMIT BEEN ISSUED FOR THIS PROJECT? | BUILDING PERMIT #: | | | | | | |
| YES NO NOT REQUIRED OTHER JURISDICTION | | | | | | | |
| B: LOCATION OF JOB | · | | | | | | |
| NAME OF OWNER: | ADDRESS OF PROJECT / JOB SITE: | | | | | | |
| OWNER PHONE NUMBER WITH AREA CODE: | CITY, VILLAGE OR TOWNSHIP: | | | | | | |
| L C: CONTRACTOR INFORMATION | | | | | | | |
| COMPANY NAME: | TELEPHONE NUMBER [] Preferred [WITH AREA CODE]: | | | | | | |
| APPLICANT: | EMAIL ADDRESS: [] Preferred | | | | | | |
| ADDRESS: | Cell []Preferred []Text []Call | | | | | | |
| CITY/STATE/ZIP: | FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION: | | | | | | |
| WORKERS COMPENSATION INSURANCE CARRIER OR REASON FOR EXEMPTION: | MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION: | | | | | | |
| ♣ D: TYPE OF JOB | | | | | | | |
| THIS WORK WILL BE PERFORMED ON: (PLEASE CHECK ALL THAT APPLY) | B.T.U. INPUT RATING OF HEATING EQUIPMENT: | | | | | | |
| RESIDENTIAL COMMERCIAL INDUSTRIAL | & DESCRIPTION OF WORK: | | | | | | |
| OIL GEO THERMAL L.P. OR NATURAL GAS | | | | | | | |
| NEW HOME MANUFACTURED HOME ALTERATIONS | | | | | | | |
| ADDITION REPLACEMENT EQUIPMENT ACCESSORY BUILDING | | | | | | | |
| & E: APPLICANTS SIGNATURE [PLEASE SIGN IN SPACE PROVIDED | BELOW] | | | | | | |
| IT WILL NOT BE COVERED, ENCLOSED, OR PUT INTO SERVICE MECHANICAL INSPECTOR. I WILL COOPERATE WITH THE EATON TO ARRANGE FOR AND OBTAIN ALL NECESSARY INSPECTIONS. PA 230, MCL 125.1523A, PROHIBITS A PERSON FROM CONSPIRE | CHIGAN RESIDENTIAL CODE AND/OR THE MICHIGAN MECHANICAL CODE, UNTIL IT HAS BEEN INSPECTED AND APPROVED BY AN EATON COUNTY N COUNTY MECHANICAL INSPECTORS AND ASSUME ALL RESPONSIBILITY SECTION 23a OT THE STATE CONSTRUCTION CODE ACT OF 1972, 1972 ING TO CIRCUMVENT THE LICENSING REQUIREMENTS OF THIS STATE SIDENTIAL BUILDING OR A RESIDENTIAL STRUCTURE. VIOLATORS OF | | | | | | |
| SIGNED: | | | | | | | |

F: EXPIRATION OF PERMIT

A PERMIT REMAINS VALID ONLY AS LONG AS WORK IS PROGRESSING AND ALL REQUIRED INSPECTIONS ARE CONDUCTED. A PERMIT WILL BE VOIDED IF THE AUTHORIZED WORK HAS NOT BEEN STARTED WITHIN 6 (SIX) MONTHS FROM THE DATE OF ISSUANCE OF THE PERMIT OR IF THE AUTHORIZED WORK IS SUSPENDED OR ABANDONED FOR ANY REASON FOR A PERIOD OF 6 (SIX) MONTHS AFTER THE TIME THE WORK WAS STARTED. A PERMIT MAY BE CANCELED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 6 (SIX) MONTHS OF THE DATE THE PERMIT WAS ISSUED OR THE DATE OF THE PREVIOUS INSPECTION.

CANCELED PERMITS CANNOT BE REINSTATED



Dial: (517) 543-3004 (8 A.M. to 5 P.M.) to speak with our office staff or, (8 A.M. to 9 A.M.) to speak with an inspector. Dial: (517) 543-9924 (24 Hours a day) to send us information or schedule an inspection by fax.



G: PLAN REVIEW REQUIREMENTS

PLANS AND SPECIFICATIONS FOR NEW CONSTRUCTION WORK, ALTERATIONS, REPAIR, EXPANSION, ADDITION, OR MODIFICATION WORK SHALL BE PREPARED BY OR UNDER THE DIRECT SUPERVISION OF AN ARCHITECT OR ENGINEER LICENSED PURSUANT TO ACT # 299 OF THE PUBLIC ACTS OF 1980, AS AMENDED, AND SHALL BEAR THAT ARCHITECT'S OR ENGINEER'S SIGNATURE AND SEAL. A PLAN REVIEW IS REQUIRED BEFORE A PERMIT CAN BE ISSUED.

EXEMPTION 1: ONE AND TWO FAMILY DWELLINGS WHEN THE BUILDING WILL NOT BE OVER 3,000 SQUARE FEET IN HABITABLE FLOOR SPACE WHEN FINISHED AND IT IS NOT OF AN UNUSUAL TYPE OF CONSTRUCTION, AND THE TOTAL BUILDING HEATING SYSTEMS INPUT RATINGS DO NOT EXCEED

200.000 B.T.U.'S

EXEMPTION 2: ALTERATIONS AND REPAIR WORK THAT THE BUILDING AND MECHANICAL OFFICIALS CONSIDER TO BE OF A MINOR NATURE.

EXEMPTION 3: WORK COMPLETED BY A GOVERNMENTAL SUBDIVISION COSTING LESS THAN \$15,000,00.

EXEMPTION 4: BUSINESS, MERCANTILE AND STORAGE BUILDINGS HAVING H.V.A.C. EQUIPMENT ONLY, WITH ONE FIRE AREA AND NOT OVER 3,000 SQUARE

FEET IN AREA.

& H: FEE TABLE

| | TYPE OF WORK | COST | # | TOTAL |
|-----|---|-------------|---|----------|
| 1. | BASE FEE [INCLUDES ONE INSPECTION] | \$ 50.00 | 1 | \$ 50.00 |
| 2. | EACH NEW RESIDENTIAL TYPE HEATING SYSTEM | \$ 72.00 | | |
| 3. | EACH PIECE OR REPLACEMENT HEATING EQUIPMENT | \$ 36.00 | | |
| 4. | WATER HEATERS UP TO 199,000 B.T.U. | \$ 18.00 | | |
| 5. | EACH SET OF GAS LOGS FOR AN EXISTING FIREPLACE | \$ 36.00 | | |
| 6. | EACH SOLID FUEL OR GAS FIREPLACE [INCLUDES #7] | \$ 36.00 | | |
| 7. | EACH FACTORY BUILT CHIMNEY, B, BW OR L TYPE VENT | \$ 36.00 | | |
| 9. | EACH RESIDENTIAL TYPE CLOTHES DRYER VENT | \$ 12.00 | | |
| 10. | EACH OPENING IN A GAS OR OIL PIPING SYSTEM | \$ 6.00 | | |
| 11. | EACH RESIDENTIAL TYPE AIR CONDITIONER OR HEAT PUMP | \$ 36.00 | | |
| 12. | EACH RESIDENTIAL GEO THERMAL SYSTEM | \$ 72.00 | | |
| 13. | EACH KITCHEN, BATH OR TOILET ROOM EXHAUST FAN | \$ 12.00 | | |
| 14. | GAS PIPING FROM THE L.P. TANK TO THE BUILDING | \$ 12.00 | | |
| 15. | EACH RESIDENTIAL HEATING OIL STORAGE TANK | \$ 24.00 | | |
| 16. | EACH HUMIDIFIER | \$ 12.00 | | |
| 17. | HEATING DUCTS AND/OR PIPING [\$30.00 MINIMUM] | \$ 0.12/FT. | | |
| 18. | EACH COMMERCIAL HEAT PUMP OR GEO THERMAL SYSTEM | \$ 72.00 | | |

| | TYPE OF WORK | COST | # | TOTAL |
|---------------|---|------------|---|-------|
| 19. | EACH AIR HANDLER AND/OR HEAT WHEEL | | | |
| 19A. | UNDER 10,000 C.F.M. | \$ 24.00 | | |
| 19B. | OVER 10,000 C.F.M. | \$ 72.00 | | |
| 20A. | EACH COMMERCIAL COOKING HOOD [WITH SMOKE TEST] | \$150.00 | | |
| 20B. | EACH COMMERCIAL COOKING HOOD [SMOKE TEST ONLY] | \$ 48.00 | | |
| 20 <i>C</i> . | EACH KITCHEN HOOD SUPPRESSION SYSTEM | \$150.00 | | |
| 20D. | TYPE 1 HOOD DUCT LEAKAGE TEST [PER TRIP TO SITE] | \$ 48.00 | | |
| 21. | EACH HEAT RECOVERY UNIT | \$ 12.00 | | |
| 22. | EACH V.A.V. BOX | \$ 12.00 | | |
| 23. | EACH UNIT VENTILATOR | \$ 12.00 | | |
| 24. | EACH MISCELLANEOUS WOOD, GAS OR OIL FIRED EQUIPMENT | \$ 36.00 | | |
| 25. | FIRE SUPPRESSION AND/OR PROTECTION SYSTEM | \$ 3.00HD | | |
| 26. | EACH EVAPORATOR COIL AND/OR CHILLER | \$ 36.00 | | |
| 27. | EACH COMPRESSOR | \$ 36.00 | | |
| 28. | EACH REFRIGERATION SPLIT SYSTEM | \$ 36.00 | | |
| 29. | SPECIAL AND SAFETY INSPECTIONS | \$ 84.00 | | |
| 30. | RE-INSPECTIONS | \$ 60.00 | | |
| 32. | FINAL AND ADDITIONAL INSPECTIONS | \$ 48.00 | | |
| 33. | ARCHIVE FEE - OVERSIZED DRAWINGS | \$ 3.00/PG | | |
| | TOTAL FEE TO BE PAID | \$ | | |