

SAFEbuilt, INC.
 107 S. CAPITAL AVE., P.O. BOX 190, ATHENS, MI 49011
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 INSPECTION SCHEDULING: 877-721-9266
 EMAIL: athensmi@safebuilt.com
 WEBSITE: www.cornerstonemi.net
 Authority: 1972 PA 230
 Completion: Mandatory to obtain permit
 Penalty: Permit cannot be issued

Permit # _____
 Fee _____
 Method of Payment _____
 Receipt # _____

**MAKE CHECK PAYABLE TO THE MUNICIPALITY
 IN WHICH YOUR PROJECT IS LOCATED**

RESIDENTIAL MECHANICAL PERMIT APPLICATION

I. Job Location			
JOB Address		Has a building permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required	
Name of Owner		Name of City, Village or Township in which job is located: <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township OF:	County
Owner Telephone			
II. Contractor/Homeowner Information			
<input type="checkbox"/> Contractor <input type="checkbox"/> Owner		Contractor License #	Expiration Date
Address			
City	State	Zip	Email
Telephone	Work/Cell		Fax
Federal Employer ID # (or reason for exemption)	Workers Comp Ins Carrier (or reason for exemption)		MESC # (or reason for exemption)
III. Type of Job			
Single Family <input type="checkbox"/> New <input type="checkbox"/> Alteration		<input type="checkbox"/> Premanuf. Home Setup (State Approved) <input type="checkbox"/> Special Inspection <input type="checkbox"/> HUD Mobile Home Setup	<input type="checkbox"/> Accessory Building <input type="checkbox"/> Other
IV. Plan Review Required			
See below for plan review requirements before completing this section.		What is the building size in square footage? _____	
Have plans been submitted? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> not required		What is the input rating of the heating system in this building? _____	
Plans are required for all building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to Act No. 299 of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal, except:			
<ol style="list-style-type: none"> 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 			
V. Signature			
Section 23a of the State Construction Code Act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines.			
Signature of Contractor or Homeowner (Homeowner signature indicates compliance with Section VI, Homeowner Affidavit)			Date
VI. Homeowner Affidavit: I hereby certify the mechanical work described on this permit application shall be installed by myself in my own home in which I am living or about to occupy. All work shall be installed in accordance with the Michigan Mechanical Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Mechanical Inspector. I will cooperate with the Mechanical Inspector and assume the responsibility to arrange for necessary inspections.			

RESIDENTIAL MECHANICAL PERMIT FEE & ITEMIZATION GRID

Permit fee is based upon the number of inspections required (\$75.00 per inspection)

Multiply Number of **Inspections** from Grid Below ____ x \$75.00/each = _____ (Total Permit Fee)

PLEASE USE THE GRID BELOW TO ITEMIZE THE JOB - ITEMIZATION IS REQUIRED

	QTY		QTY
RESIDENTIAL HEATING SYSTEMS		PIPING	
GAS BURNING EQUIPMENT		FUEL GAS PIPING	
OIL BURNING EQUIPMENT		HEAT PUMP UNDRGRND PIPING (REQ'D PRESS. TEST)	
SOLID FUEL EQUIPMENT INDOORS		HYDRONIC PIPING	
SOLID FUEL EQUIPMENT OUTDOORS		ALL GAS PIPING; # OF OPENINGS	
BOILER		AIR HANDLER	
GAS BURNING FIREPLACE		FIRE SUPPRESSION (Sprinkler System)	
HEAT PUMP/GEOTHERMAL		UNIT VENTILATORS/PTAC UNITS	
UNIT HEATER		GENERATOR	
DUCT WORK		TYPE OF FUEL (MARK ALL THAT APPLY)	
WATER HEATER		PROPANE	
SOLAR; SET OF 3 PANELS-FLUID TRANSFER		NATURAL GAS	
(INCLUDES PIPING)		FUEL OIL	
AIR CONDITIONING REPLACEMENT		WOOD	
AIR CONDITIONING NEW		PELLETS (CORN/WOOD ETC.)	
VENTING		MISC. (INDICATE BELOW ITEM(S) BEING INSTALLED)	
CLASS A & B VENT			
DRYER VENT			
BATH EXHAUST		INSPECTIONS (Add QTY column & transfer # above)	
KITCHEN EXHAUST		CERTIFICATION (Gas, HP, Pressure Test or Fire Supp.)	
CHIMNEY LINER		UNDERGROUND	
PROPANE TANKS		ROUGH-IN	
TEMP. ON-GROUND CONNECTION (2 INSP. REQ'D)		SPECIAL/SAFETY INSPECTION	
ABOVE GROUND TANK (OPEN TRENCH)		ADDITIONAL INSPECTION	
UNDERGROUND TANK (REQ'D UNDRGRND + FINAL)		FINAL	
HUMIDIFIERS		MISC.	
AIR CLEANERS		OTHER – INDICATE HERE: _____	

THIS APPLICATION IS FOR RESIDENTIAL MECHANICAL PROJECTS

ISSUED PERMITS EXPIRE 180 DAYS FROM THE ISSUED DATE. NO REFUNDS WILL BE GIVEN FOR EXPIRED PERMITS. AN ADMINISTRATIVE FEE OF \$75.00 WILL BE RETAINED FOR CANCELED/TERMINATED PERMITS OR APPLICATIONS.

WORK THAT IS STARTED WITHOUT A PERMIT MAY BE SUBJECT TO A \$75.00 VIOLATION FEE IN ADDITION TO THE REQUIRED PERMIT FEE.

REINSPECTIONS OF DOCUMENTED CODE VIOLATIONS ARE SUBJECT TO A \$75.00 REINSPECTION FEE - PAYABLE PRIOR TO SCHEDULING THE REINSPECTION.

MAKE CHECK PAYABLE TO THE MUNICIPALITY IN WHICH YOUR PROJECT IS LOCATED

RETURNED CHECKS ARE SUBJECT TO FEES IN ACCORDANCE WITH THE APPROPRIATE MUNICIPALITY'S RETURNED CHECK POLICY.

This Department 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.