

BUILDING DEPARTMENT 1401 W. HERBISON ROAD	TYPE OF EQUIPMENT:		PER UNIT	NO.	FEE
DEWITT, MICHIGAN 48820	Application Fee (non-refundable)		10.00	1	10.00
PHONE: (517) 668-0278 FAX: (517) 669-6496 www.dewitttownship.org	Residential Base Permit Fee: (includes one (1) inspection)		65.00 ea.		
www.dewitttownsmp.org	Gas/Oil Burning Equipment: (new and/or conversion)		30.00 ea.		
DATE:	Solid Fuel Equipment: (wood/fireplace stoves and add-on furnaces)		30.00 ea.		
THIS APPLICATION IS FOR:	Factory Chimney or Liner: (separate installation)		25.00 ea.		
(PRINT NAME OF OWNER)	Res. Htg. System: (complete-including duct and pipe)		50.00 ea.		
	Duct System: Residential - (complete)		25.00 ea.		
(JOB SITE - STREET ADDRESS)	Addition to Residential		10.00 ea.		
(30B SHE-SIREET ADDRESS)	Solar Equip. System: (piping fee included - per each 3 panels or fraction thereof)		20.00/3		
(CITY, STATE AND ZIP CODE)	Gas Piping: (each opening -	new installations)	6.00 ea.		
1. Property Owner's Ph. ()	Exhaust Fans:		6.00 ea.		
	Water Heater:		6.00 ea.		
HOMEOWNER'S AFFIDAVIT: "Section 23a of the state construction code act of 1972, Act No. 230 of the Public Acts of 1972, being	Humidifiers:		10.00 ea.		
	Flue Dampers/Vent Dampers:		6.00 ea.		
	Boilers:	(under 6 family)	25.00 ea.		
section 125.1523a of the Michigan Compiled Laws,	LPG & Fuel Oil Tanks: (pipin				
prohibits a person from conspiring to circumvent the	• •	Above ground	20.00 ea.		
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." I hereby certify the work described on this application shall be installed by me in my own single family dwelling in which I am living or about to occupy.		Under ground	25.00 ea.		
	**	minimum \$20.00)	.75/head		
	Central Air Conditioning and	Heat Pumps:	30.00 ea.		
	Special Inspections: (minimum 1 hour)	50.00/hr.		
	Additional, Final & Re-inspections:		50.00 ea.		
	Special Letter of Approval:		10.00 ea.		
		TOTAL			
(HOMEOWNER SIGNATURE) (DATE)	DESCRIPTION OF WORK:				
STATE LAW ACT 53 REQUIRES YOU TO CALL MISS DIG					
72 HOURS BEFORE YOU DIG					
1-800-482-7171					
CONTRACTOR:	OFFICE NO.:				
CELL NO.:	FAX NO.:				
ADDRESS:	CITY:	STATE:	ZIP COI	E:	
EMAIL:	STATE LICENSE NO.: EXP.		. DATE:		
FEDERAL ID NO. OR REASON FOR EXEMPTION	(DO NOT USE S.S.#):				
WORKERS COMP INS. CARRIER OR REASON FO	R EXEMPTION:				
MESC EMPLOYER NUMBER OR REASON FOR EX	XEMPTION:				
CONTRACTOR'S SIGNATURE:					

RESIDENTIAL MECHANICAL PERMIT APPLICATION

Mechanical Permit No.______ Building Permit No._____