

PLUMBING PERMIT APPLICATION (revised 03-01-23)

Charter Township of Superior 3040 N. Prospect, Ypsilanti, MI 48198 (734) 482-6099

I. JOB LOCATION/C	OWNER INFORMATION						
Name of Owner/Agent					Owner/Agent Telephon	e Number	
Owner's Street Address				City		Zip Code	
Street Address and Job Location			Email address				
			l				
	OMEOWNER INFORMATION						
Contractor NameHomeowner				Contractor License Number Expiration Date			
Address (Street Number & Name)			City		State	Zip Code	
Telephone Number (Include	Area Code)	Email addres	s			<u> </u>	
() Workers Comp. Ins.Carrier			Federal Employer ID #				
Name of Master Plumber				Master License Number Expiration		Expiration Date	
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III TYPE OF IOP							
III. TYPE OF JOB	Nous	Description o	f \\/orl				
Single Family New Descript Other Alteration			HOIT OF WORK				
IV. PLAN REVIEW REQUIRED							
PLANS MUST BE SUBM	ITTED BEFORE A PERMIT CAN BE ISS	SUED, EXCEP	T AS LISTED I	BELOW:			
Plans are not required f	or the following:						
1. One and two family dwellings containing not more than 3,500 square feet of building area.							
 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 "PLANS NOT REQUIRED."PLANS NOT REQUIRED							
	other building types and shall be prepare t architect's or engineer's seal and signat	•	the direct supe	ervision of an arc	nitect or engineer license	ed pursuant to 1980	
V. APPLICANT SIGNA	ATIIBE						
	construction code act of 1972, 1972 P. of this state relating to persons who a to civil fines.			•			
Signature of Plumbing Co with Section VI Homeowner A	ntractor, Master Plumber, Water Treatme ffidavit)	ent Installer or I	Homeowner (H	lomeowner's signatı	ure indicates compliance	Date:	

VI. HOMEOWNER AFFIDAVIT

I hereby certify the plumbing work described on this permit application shall be installed <u>by myself in my own home</u> 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 <u>inspected</u> and <u>approved</u> by the Township Plumbing Inspector. I will cooperate with the Township Plumbing Inspector and assume the responsibility to arrange for necessary inspection.

PLUMBING PERMIT APPLICATION - PAGE TWO VII. FEE CHART - Enter the number of items being installed, multiply by the unit price for the total fee. **FEE** # ITEMS **TOTAL** # ITEMS **TOTAL FEE** 11. Pumps 1. Application Fee \$30.00 1 \$30.00 \$10.00 (Ejector, Lift, Sump) 12. Sewers (Sanitary, 2. Total Number of \$50.00 \$30.00 Inspections Storm or Combined) 3. Air Admit Valve \$10.00 13. Stacks (Soil, Waste, \$10.00 Vent and Conductor) 4. Back-flow Preventer \$5.00 (Supply) 14. Sub-soil Drains \$10.00 5. Back Water Valve 15. Water Distribution \$10.00 \$5.00 (Sanitary) Piping - 1" or less 6. Catch Basins, Manholes 16. Water Distribution \$10.00 \$25.00 Piping - Over 1" 7. Fixtures, Floor Drains, Special Drains, Water \$10.00 17. Water Heater \$25.00 Connected Appliances 18. Water Heater - Tankless \$25.00 19. Water Service -8. Hose Bibs \$10.00 \$20.00 9. Medical Gas Systems Less than 2" \$50.00 20. Water Service -10. Mobile Home Hook-up \$30.00 \$40.00 2" or greater

TOTAL FEES	
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Make checks payable to "Charter Township of Superior"

VIII. FEE CLARIFICATION

ITEM # 4, FIXTURES, FLOOR DRAINS, SPECIAL DRAINS AND WATER CONNECTED APPLIANCES INCLUDE: Acid Waste Drain, Autopsy, Bathtub, Bed Pan Washer, Bidet, Condensate Drain, Connection to Sprinkler System (Irrigation), Cuspidor, Dishwasher, Domestic Water Treatment and Filtering Equipment, Drinking Fountain, Embalming Table, Emergency Eye Wash, Emergency Shower, Floor Drain, Garbage Grinder, Grease Trap, Ice Making Machine, Lavatories, Laundry Tray, Plaster Trap, Refrigerator, Roof Drain, Shower Stall, Sink (any description), Slop Sink, Starch Trap, Urinal, Washing Machine, Water Closets, Water Connection to Carbonated Beverage Dispensers, Water Connected Dental Chair, Water Connected Sterilizer, Water Connected Still, Water Cooler, Water Outlet or Connection to Filters, Water Outlet or Connection to Heating System, Water Outlet or Connection to any Make-up Water Tank, Water Softener, plus any other fixture, drain, or water connected appliance not specifically listed.

IX. DOMESTIC WATER TREATMENT AND FILTERING

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 waste piping in buildings if a permit is secured and inspections are performed and the installation complies with the State Plumbing Code. Any violations shall be corrected by the responsible installer. The permit application shall include the application fee, the number of water treatment devices recorded in Item #7, the appropriate water distribution pipe size fee, and one inspection.

X. GENERAL

Plumbing work shall not be started until the application for a permit has been filed with the Charter Township of Superior Building Department. All installations shall be in conformance with the Michigan Plumbing Code. **No work shall be concealed until it has been inspected.** When ready for inspection(s), contact the Building Department a minimum of 24 hours in advance. **Job Address and Permit Number Required.**

XI. 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.