Please make checks payable to: Spring Arbor Township

# TOWNSHIP OF SPRING ARBOR

107 Teft Rd. • P.O. Box 250 Spring Arbor, MI 49283 (517) 750-2800 • (517) 750-2802 fax

Total Fees:	
Permit No.;	
Paid:	

# MECHANICAL PERMIT APPLICATION

I. JOB LOCATION	Date of Application
Name of Owner/Agent	Has a building permit been obtained for this project?      YES    NO      NOT REQUIRED
Street Address & Job Location (Street No. and Name)	City/Village Township County

### **II. CONTRACTOR/HOMEOWNER INFORMATION**

Contractor Homeowner Name (Check Appropriate Box)	License Number	Expiration Date
Address (Street No. and Name)	City State	Zip Code
Telephone Number ( )	Federal Employer ID Number (or 1	reason for exemption)
Workers Compensation Insurance Carrier (or reason for exemption)	MESC Employer Number (or reason for exemption)	

#### III. TYPE OF JOB

IV. BRIEF DESCRIPTION OF JOB

Single Family	1. New 2. Remodel	6. Special Inspection	
Other	4. New 5. Remodel	7. Mobile Home Setup	
		8. Modular Home Setup	

## V. APPLICANT SIGNATURE

Section 23a of the State Construction Act of 1972, Act number 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, 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 Licensee or Homeowner

(If Homeowner is applicant, Homeowner must also sign affidavit below)

#### 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 State 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.

Signature of Homeowner

#### INSTRUCTIONS

GENERAL: Mechanical work shall not be started until the application for permit has been filed with the Township Office. All installations shall be in conformance with the State Mechanical Code. No work shall be concealed until it has been inspected. The name of the inspector and the telephone number will be provided on the permit form. When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the location and permit number. 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 CANCELLED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN SIX MONTHS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CANCELLED PERMITS CANNOT BE REINSTATED.