

ISABELLA COUNTY MECHANICAL PERMIT APPLICATION

ISABELLA COUNTY COMMUNITY DEVELOPMENT DEPARTMENT 200 N. MAIN ST., MT. PLEASANT, MI 48858 (989) 317-4061 FAX (989) 775-6681

MECHANICAL PERMIT APPLICATIONS WILL **NOT** BE ACCEPTED UNLESS ALL THE FOLLOWING ARE PROVIDED AT THE TIME OF APPLICATION:

1. PROPERTY OWNER/JOB LOCATION:

• The correct property owner name, complete address, phone number and property tax id number is required to be provided. Property Tax ID (a.k.a. parcel number) and parcel data information can be found at: app.fetchgis.com/Isabella

2. CONTRACTOR/HOMEOWNER INFORMATION

- Indicate who is applying for the permit by checking the appropriate box.
- The contractor's name, complete address, phone number, contractor license number and expiration date, federal employer ID number, workers compensation insurance carrier, MESC employer number and email address (if available) are required.
- If the homeowner is applying for the permit AND the homeowner information matches the information in number 1 above, this may be left blank.

3. TYPE OF JOB

- Indicate the appropriate job type by checking the appropriate boxes.
- A complete description of the work being performed is required.

4. PLANS REQUIRED

- Answer all questions in the Plans Required section to determine if plans are required for review by the Mechanical Inspector prior to permit issuance. If you answered YES to any questions in this section, plans are required.
- Construction documents may be submitted by the owner or the owner's architect, engineer, contractor or agent. (The construction statutes or codes do not fix the responsibility for the submission of construction documents. However, the owner of the construction project has the responsibility to assure that it is done.)

5. PLAN REVIEW REQUIRED

- The purpose of a Plan Review is to assure the construction project is designed in compliance with the code. If there are issues of noncompliance, they may need to be addressed during the review process.
- Answer all questions in the Plan Review section to determine if a plan review is required for this project. If you answered NO to any of these questions, a plan review application is required to be submitted. Please contact the Community Development / Inspections office for details on submitting a plan review application.

6. FEE CHART:

• Payment of all fees are required to be made at time of application. Check may be made out to Isabella County.

7. APPLICANT SIGNATURE:

• Signature of the applicant is required. If the applicant is the homeowner, the applicant's driver's license number is required.

TOTAL PERMIT FEES MAY BE DOUBLED IF WORK IS STARTED BEFORE THE PERMIT IS ISSUED

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MECHANICAL PERMIT APPLICATION

Isabella County Community Development/Inspections 200 N Main St Mt. Pleasant MI 48858 (989) 317-4061

					(989	,								
	PROPERTY OWNER / J	OB L			Num	hor			Property	Toy ID.				1
Name Phone Nur				Nulli	nber			Property Tax ID:						
Job Street Address City								Township		S	Section			
Owner Mailing Address City								State		Z	Zip Code			
Ow	vner Email Address		<u> </u>								<u> </u>			
2.	CONTRACTOR / HOME	EOW	NER IN	FORM	1AT	ION – Indicate	e the Applic	ant:	□ Con	tractor	□Hon	neowne	•	
Coı	ntractor Name					Contractor License Number				Expiration Date				
Co	ntractor Address					City				State	Zip Code			
Pho	one Number					Federal Emplo	yer ID Num	ber (d	or reason	for exem	ption)			
	orkers Compensation Insurant exemption)	ice Ca	arrier (or	reasor	1	MESC Employ	yer Number	(or re	ason for	exemptio	on)			
Cor	ntractor Email Address	,												
3. TYPE OF JOB				Method of Compliance										
	Single Family		New			BOCA Home Se Modular)	etup		Michig	an Buildi	ilding Code			
					H	IUD Manufactu		Rehabilitation Code						
	Commercial/Industrial		Alterat	ion	1 1	Mobile)	irea nome		Rehabi	litation Co	ode			
	Commercial/Industrial scription of Work:		Alterat	ion	1 1		ired Home		Rehabi	litation Co	ode			
			Alterat	ion	1 1		ired Home		Kehabi	litation Co	ode			
Des	Scription of Work:		Alterat	ion	1 1		ired nome		Rehabi	litation Co	ode			
Des				YES	[]	Mobile)	s this new in					YES		10
4. Is t	scription of Work: PLANS REQUIRED	uction	1? 🗆			Mobile)		dustr	ial const	ruction?				10
4. Is to 5. SEC	PLANS REQUIRED his new multi-family construithis new commercial construithis new REQUIRED	action action a	n? □	YES YES		Mobile)	s this new in	dustr	ial const	ruction?				NO NO
4. Is to 5. SECTION 1.	PLANS REQUIRED his new multi-family construits new commercial construits new PLAN REVIEW REQUIRED	uction 2 RED	n? □	YES YES		Mobile) NO Is	s this new in f you answer equired.	dustr	ial const	ruction?				NO NO
4. Is t 5. SEC Is t Is t	PLANS REQUIRED his new multi-family construction his new commercial construction PLAN REVIEW REQUIRED CTION 1 he building a one- or two-far you answered NO, skip to Se he total building heating/cook	action ac	n? ? dwelling 2, other	YES YES		Mobile) NO Is NO r the next questi	s this new in f you answer equired.	dustr	ial const	ruction?	uestio	ns, plan	s are	
4. Is t 5. SEC Is t If y Is t Wh	PLANS REQUIRED his new multi-family construction of Work: PLAN REVIEW REQUIRED PLAN REVIEW REQUIRED CTION 1 he building a one- or two-famous answered NO, skip to Se	nction? RED mily contion oling s	dwelling 2, other system r	YES YES wise arating 3	[[] [] [] [] [] [] [] [] [] [NO Is NO r the next question BTU or less?	s this new in f you answer equired.	dustr YES	ial const	ruction?	uestio	YES YES	s are	NO NO

Does the building have HVAC equipment only?		YES		NO			
Is there only one fire area?		YES		NO			
Is the building less than 3,500 ft ² What is the building area (in ft ²)?		YES		NO			
If you answered NO to any question is section 2, a plan review IS required.							

The purpose of a Plan Review is to assure the construction project is designed in compliance with the code. If there are issues of noncompliance, they may need to be addressed during the review process.

Answer all questions in the Plan Review section to determine if a plan review is required for this project. If you answered NO to these questions, a plan review application is required to be submitted. Please contact the Community Development Inspections office for details on submitting a plan review application.

6. FEE C	CHART	Fee	#Items	Total
BASE FEE NON- REFUNDABLE (Admin Fee plus one Inspection)		\$90.00	1	\$90.00
Air	1,000 to 10,000 CFM	\$19.00 each		
Handlers	Over 10,000 CFM	\$55.00 each		
Bath/Kitchen Fans (less than 1,000 CFM)		\$7.00 each		
Central A/C, Split Refrigeration, Evap. Cooling		\$24.00 each		
Chillers / Cooling Towers / Compressors		\$28.00 each		
Chimney (Factory Built), Chimney Re-lining or B-Vent		\$23.00 each		
Commercial Hoods		\$19.00 each		
Dampers (Flue, Vent, Fire)		\$7.00 each		
Duct Systems / Hydronic Piping		\$23.00 each		
Fire Suppression (min \$19.00)		\$0.55 / head		
Fireplace and Vent		\$24.00 each		
Gas Piping	(each outlet)	\$7.00 each		

			Fee	#Items	Total
Heating Systems	Gas Heat Pump HVAC Oil Solid Fuel		\$31.00 each		
Humidifiers, Heat Recovery, VAV Box, Unit Ventilators			\$10.00 each		
Infrared/Terminal Unit Heaters		\$19.00 each			
Inspection - Rough			\$ 65.00 each		
Inspection - Final		\$ 65.00 each			
Inspection - Additional		\$ 65.00 each			
Mobile Home		\$36.00 each			
Tanks (LPG fuel Oil) Inc. Piping to Building		\$19.00 each			
Water Heater and Vent		\$10.00 each			
Hourly Inspection Rate (for items not specifically listed)		\$41.00 / hour			
		(mus	t include \$90.00	Total Fee base fee)	

FEE CLARIFICATION

Fire suppression Permits shall include the Base Fee plus minimum Fire Suppression Fee plus the per suppression head fee.

The fire Suppression Fee per head above the minimum, is rounded to the nearest \$1.00

7. 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 residential structure. Violators of Section 23a are subject to civil fines.						
Signature of Mechanical Contractor	Date:					
Signature of Homeowner (if homeowner is the applicant)	Date:					
Homeowner Driver's License Number:						
Homeowner Affidavit: I hereby certify the mechanical work described on this permit application shall be installed by myself in my own home which I am living or about to occupy. All work shall be installed in accordance with the State Code and shall not be						

Mechanical work shall not be started until the mechanical permit has been issued. All installations shall be in conformance with the State Mechanical Code. **No work shall be concealed until the work has passed an inspection.** You are required to call the inspection line at (989) 317-4220 and provide the required details a minimum of 24 hours in advance.

enclosed, covered up, or put into operation until it has been inspected and approved by the County Mechanical inspector. I will

cooperate with the County Mechanical Inspector and assume the responsibility to arrange for necessary inspections.

A permit remains valid as long as work is progressing and inspections are being conducted. A permit shall become invalid if the authorized work is not commenced within six (6) months after the issuance of the permit or if the authorized work is suspended or abandoned for a period of six (6) months. A permit shall be cancelled when no inspections are conducted within six (6) months of the date of issuance or the date of a pervious inspection. Cancelled permits shall not be refunded or reinstated.