RESIDENTIAL ELECTRICAL PERMIT

LOCKE TOWNSHIP

3805 Bell Oak Rd. Williamston, MI

| Date / / | _ | | 800-627-2801 800-627-2801 Ext. 201 | | |
|--|--|---------|---------------------------------------|--|--|
| LOCKE TOWNSHIP | Permit # : | | | | |
| Job Location: | Property Tax No: | | | | |
| Owner: | | | | | |
| Address: | | | | | |
| Owners Email: | | | | | |
| | the road: North South East West sest roads)& | No. | | | |
| Single Inspection \$48.00 | ITEMIZATION | xxx. | | | |
| Special/Safety Inspection \$ 48.00 | | | | | |
| Addition Remodel \$114.00 (Two inspections) Addition Remodel w/Service Upgrade (Three inspections) \$156.00 New Residence \$156.00 (Three Inspections) | 200 amp thru 600 amp Circuts Lighting Fixtures per 25 and fraction of Dishwasher, Garbage disposal & range hood Furnace unit heater Electrical heating units (baseboard) Power Outlets (including ranges,dryers, ect.) Signs per circuit Feeders | | | | |
| | Data/Telecommunications outlets | | <u>├</u> | | |

If a dwelling unit is 3,500 square feet or greater plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued. Plans are not required for the following:

1. When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area, unless it is determined to be required by the code official.

If work being performed as described above, check box "Plans Not Required." Plans Not Required

| COST OF PERMIT: \$ | Description of work: |
|-------------------------|----------------------|
| Make checks payable to | |
| LOCKE TOWNSHIP | |
| | Additional Notes: |
| Building Dept. Approval | |

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| Contractor Name: | Phone | Phone # | | | Fax# | | | | |
|---|--|---------|-------------------|---|------|-----------|-----|--|--|
| | | | | | | | | | |
| Address | | City | | | | State | Zip | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Federal I.D. No/Social Security No. | | • | MESC Employer No: | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Contractor License No. Exp. Da | ontractor License No. Exp. Date | | | Worker's Compensation Insurance Carrier | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Name of Master Electrician | | | M | aster License No. | | Exp. Date | | | |
| | | | | | | | | | |
| Master Electrician Business Address | | City | | | | State | Zip | | |
| | | City | | | | State | Σip | | |
| | | | | | | | | | |
| If exempt from any of the above, explain here: | | | | Email: | | | | | |
| | | | | (REQUIRED) | | | | | |
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| Section 23A of the state construction co | Section 23A of the state construction code act of 1972, MCL 125.1523A, prohibits a person from conspiring to | | | | | | | | |
| circumvent the licensing requirements of the state relating to persons who are to perform work on a residential | | | | | | | | | |
| building or a residential structure. Violators of Section 23 A are subjected to civil fines. | | | | | | | | | |
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I am/will be the owner and occupant of the premises on which the described Installation is proposed and will be doing the proposed work myself. I will not allow anyone to do any work.

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 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED.

HOME OWNERS AFFIDAVIT and SIGNATURE

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for necessary and timely inspections.

Signed:

Date:

AGENT/CONTRACTOR'S AFFIDAVIT and SIGNATURE

I herby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: _____ Date: _____