ELECTRICAL APPLICATION

FRANKENLUST TOWNSHIP

Frank Bryden Jr.-Inspector PH: (989) 892-4746 FAX: (989) 892-9941

Work Description:

2401 Delta Rd., Bay City MI 48706-9340 Ph: (989)686-5300 Fax: (989)686-5370

| Check # | |
|-----------|--|
| Amount \$ | |
| Date | |
| Initials | |

Contractor's Registration is Required Annually

| SITE ADDRESS | | CONTRACTOR | | | | | |
|---|-------|-----------------------|------------------------------|---------------------------------------|--------------|---------------------|-------|
| OWNER | | | ADDRESS | | | | |
| OWNER'S PH. NO. | | | CITY/STATE/ZIP CODE | | | | |
| OWNER'S ADDRESS | | | CONTRACTOR'S PH. NO. | | | | |
| DESCRIBE USE OF BUILDING:SINGLE FAMILY_RENTALCOMMERCIALNEWADDITIONREMODEL | | | CONTRACTOR'S LICENSE NO. 61- | | | | |
| SERVICE ONLY | | | EXPIRATION DATE | | | | |
| EMAIL | | | FEDERAL EMPLOYER ID. | E | EMPLOYER NO. | | |
| Has a Building Permit Been Obtained for this Project? Yes No Not Required | | POWER CO. REQUEST NO. | | | | | |
| FEES U | JNITS | PER UNIT | TOTAL | | UNITS | PER UNIT | TOTAL |
| Permit Base Fee | 1 | \$48.00 | \$48.00 | Feeder, Busducts, wire, etc per 50' | | \$ 17.00 | |
| Per Additional Inspection | | \$35.00 | | Mobile Home Site | | \$ 15.00 | |
| Service-Thru 200 AMP | | \$27.00 | | Recreational Vehicle Site | | \$ 10.00 | |
| Over 200 thru 600 AMP | | \$40.00 | | Equipment up to 20 KVA or HP | | \$ 12.00 | |
| Over 600 thru 800 AMP | | \$54.00 | | Equipment 21 to 50 KVA or HP | | \$ 22.00 | |
| Circuits | | \$ 8.00 | | Equipment Over 51 KVA or HP | | \$ 28.00 | |
| Lighting Fixtures, per 20 | | \$14.00 | | Conduit only; or Grounding only | | \$ 49.00 | |
| Dishwasher/Range Hood/Garbage Disposal | | \$ 9.00 | | Fire Alarm-Up to 10 Stations Or Horns | | \$140.00 | |
| Furnace | | \$12.00 | | Over 10 Stations or Horns | | \$215.00 | |
| Electrical Heating Unit | | \$ 9.00 | | Administrative Fee-Double to | | \$200.00 | |
| Power Outlet (Range, | | \$17.00 | | Informational Inspection | | \$48.00 | |
| Dryer, etc.) | | | | Final Inspection Fee | | \$30.00 | |
| Signs (Each Circuit) | | \$14.00 | | Plan Review Fee (Commercial Only) | | \$65.00 per hour | |
| Mfr. Home Service Only or Temporary Pole | | \$48.00 | | TOTAL FEE | 9 | 3 | |

HOMEOWNER AFFIDAVIT

EXPIRATION OF PERMIT: A permit remains valid as long as work is progressing and inspections are required and conducted. A permit shall become invalid if work is not commenced within six months after issuance of the permit or if the work is suspended or abandoned for a period of six months after the time of commencing the work. A **PERMIT WILL BE CANCELED** when no inspections are requested or conducted within six months of the date of issuance. **CANCELED PERMITS CANNOT BE REINSTATED**. I hereby certify the electrical 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 in accordance with the National Electrical Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the electrical inspector. I will cooperate with the electrical inspector and assume the responsibility to arrange for necessary inspections.

Section 23a of the State Construction Act of 1972, Act No. 230 of the public acts of 1972, being section 125 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 residential structure. Violators of Section 23a are subject to civil fines. A PLAN REVIEW may be required before work is started, on any building other than a single family dwelling less than 3,000 square feet, or wiring or alteration to an electrical system that cost more than \$10,000.00.

I agree to abide by all requirements of the electrical code including calling for inspection before any electrical work is covered or used, and upon completion. I will accompany the inspector during the inspection.

| Contractor's Signature or Homeowner's Signature | Date | Phone Number |
|---|------|--------------|
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