

2025

MECHANICAL PERMIT

FRANKENLUST TOWNSHIP

PERMIT: _____

FINALIZED: _____

1. JOB LOCATION

Parcel ID # _____

| | |
|---|---|
| Name of Owner/Agent | Has a building permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required |
| Street Address & Job Location (Street No. and Name) | City (circle one) BAY CITY FREELAND SAGINAW |

2. CONTRACTOR/HOMEOWNER INFORMATION

| | | | |
|---|--|---|---------------------|
| Indicate Who the Applicant is <input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner | Name of Contractor | Contractor License No. | Expiration Date |
| Name of Business | Business Address | City | State Zip Code |
| Homeowner's Name | Email: | | |
| Homeowner's Mailing Address | City | State | Zip Code |
| Homeowner's Telephone No. () | Contractor's Telephone No. () | Federal Employer ID # (or reason for exemption) | |
| Workers Compensation Insurance Carrier (or reason for exemption) | | MESC Employer Number (or reason for exemption) | |

3. TYPE OF JOB

| | | | | |
|--|-------------------------------------|---|--|--------------------------------------|
| <input type="checkbox"/> Single Family | <input type="checkbox"/> New | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> Premanufactured Home Setup (State Approved) | <input type="checkbox"/> State Owned |
| <input type="checkbox"/> Other | <input type="checkbox"/> Alteration | <input type="checkbox"/> LP Tank | <input type="checkbox"/> Manufactured Home Setup (HUD Mobile Home) | <input type="checkbox"/> School |

4. FEE CHART

| DESCRIPTION | FEE | # ITEMS | TOTAL | DESCRIPTION | FEE | # ITEMS | TOTAL |
|---|-----------|---------|---------|---|--------------------|---------|---------|
| 1. Application Fee /Rough In Inspection (Non-Refundable) | \$50.00 | 1 | \$50.00 | 18. Duct- (minimum \$25.00) | \$.10/ft | | |
| 2. Residential Heating System (includes duct & pipe) New Building ONLY (see sec 7) | \$50.00 | | | 19. Heat Pumps; Commercial (pipe not included) | \$20.00 | | |
| 3. Gas/Oil burning equip. (furnace) New and/or Conversion Unit (Pool Heater) | \$30.00 | | | Air Handlers/Heat Wheels | \$20.00 | | |
| 4. Residential Boiler (see sec 7) and/or Residential Gas Generator | \$30.00 | | | 20. Under 10,000 CFM | \$20.00 | | |
| 5. Water Heater | \$ 5.00 | | | 21. Over 10,000 CFM | \$60.00 | | |
| 6. Flue/Vent Damper | \$ 5.00 | | | 22. Commercial Hoods | \$15.00 | | |
| 7. Solid Fuel Equip. (includes chimney) <input type="checkbox"/> 37. Gas burning fireplace | \$30.00 | | | 23. Heat Recovery Units | \$10.00 | | |
| 8. Chimney, factory built-installed separately | \$25.00 | | | 24. V.A.V. Boxes | \$10.00 | | |
| 9. Solar; set of 3 panels (includes piping) | \$20.00 | | | 25. Unit Ventilators | \$10.00 | | |
| 10. Gas Piping; each opening new installation (Residential) | \$ 5.00 | | | 26. Unit Heaters (Terminal Units) | \$15.00 | | |
| 11. Air Conditioning (includes split systems) | \$30.00 | | | 27. Fire Suppression/Protection- (minimum \$20.00) | \$.75 per head | | |
| 12. Heat Pumps; Complete Residential | \$30.00 | | | 28. Evaporator Coils | \$30.00 | | |
| 13. Bath & Kitchen & Dryer exhaust | \$ 5.00 | | | 29. Refrigeration (Split System) | \$30.00 | | |
| Tanks- | | | | 30. Chiller | \$30.00 | | |
| <input type="checkbox"/> 14. Aboveground (see Sec 7) | \$20.00 | | | 31. Cooling Towers | \$30.00 | | |
| <input type="checkbox"/> 38. LP Tank Connection | | | | 32. Compressor | \$30.00 | | |
| <input type="checkbox"/> 15. Underground (see Sec 7) | \$25.00 | | | 33. Special/Safety Insp. (Includes Cert. Fee) | \$50.00 | | |
| <input type="checkbox"/> 39. LP Tank Connection | | | | 34. Additional Inspection | \$50.00 | | |
| 16. Humidifiers | \$10.00 | | | 35. Starting Work Without a Permit | \$100.00 | | |
| 17. Piping & Geothermal Piping-min \$25 | | | | 36. Miscellaneous Items | \$ 30.00 | | |
| <input type="checkbox"/> 40. Process piping (main gas line) | \$.05/ft. | | | 37. Final Inspection | \$50.00 | 1 | \$50.00 |
| | | | | TOTAL FEES \$ | | | |

**CLOSED, CANCELED, AND EXPIRED PERMITS
CANNOT BE REFUNDED.**

Make Checks Payable To:
"FRANKENLUST TWP. TREASURER"
 Ck # _____ Amt. _____
 Date _____ Initial _____

5. APPLICANT 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 a residential structure. Violators of section 23a are subjected to civil fines. (Homeowner's signature indicates compliance with Sec. 6 Homeowner Affidavit.)

Signature of Licensee or Homeowner: _____

Date: _____

6. 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 Twp. Mechanical Inspector. I will cooperate with the Twp. Mechanical Inspector and assume the responsibility to arrange for necessary inspections.

7. Fee Clarification

ITEM #2 RESIDENTIAL HEATING SYSTEM: This item is used for the installation of a heating system in a **new residential structure**. Item #10; Gas Piping and #18; Duct, **SHOULD NOT BE** charged. Replacement systems should be itemized.

ITEM #14 AND #15, TANKS: A homeowner must own tank to install. If homeowner does not own tank, a license mechanical contractor must install tank.

8. PLAN REVIEW REQUIRED

Plans must be submitted with an Application for Plan Examination and the appropriate deposit before a permit can be issued, except as listed below.

Plans are not required for the following:

1. One-and two-family dwellings when the total building heating/cooling system input rating is 375,000 Btu's or less.
2. Alterations and repair work determined by the mechanical official to be of a minor nature.
3. Business, mercantile, and storage buildings having HVAC equipment only, with one fire area and not more than 3,500 square feet.
4. Work completed by a governmental subdivision or state agency costing less than \$15,000.00.

If work being performed is described above, check box below **"Plans Not Required."**

What is the building size in square footage? _____

What is the input rating of the heating system in this building? _____

Plans are required for all other building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to 1980 PA 299 and shall bear that architect's or engineer's seal and signature.

Plan Review Submission No. _____

☐ **Plans Not Required**

9. INSTRUCTIONS FOR COMPLETING APPLICATION

GENERAL: Mechanical work shall not be started until the application for permit has been filed with the Township of Frankenlust. All installations shall be in conformance with the State Mechanical Code. **No work shall be concealed until it has been inspected.** The telephone number for the inspector will be provided on the permit form below. When ready for an inspection, call the inspector providing as much advance notice as possible. The inspector will need the **job 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 CANCELED 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 REFUNDED OR REINSTATED.**

ALL PERMIT FEES WILL BE DOUBLED IF WORK IS COMPLETED WITHOUT A PERMIT.

Authority: 1972 PA 230
Completion: Mandatory to obtain permit
Penalty: Permit can not be issued

MECHANICAL INSPECTOR: THOMAS VERELLEN (989) 246-4817

**FRANKENLUST TOWNSHIP
2401 DELTA ROAD
BAY CITY MI 48706
PH: (989) 686-5300 FAX: (989) 686-5370**

| Final Inspection | Date |
|---|---------------|
| Inspection (circle one) PASSED | FAILED |
| If Failed , what did not pass inspection? _____ _____ _____ | |