

**Plumbing Inspector:**

Thomas Verellen  
(989) 246-4817

**\*\*Payment must be received in  
order to process application\*\***

**Frankenlust Township**

2401 Delta Rd. Bay City, MI 48706

Phone: (989) 686-5300 / Fax: (989) 686-5370

**2025 Plumbing Permit Application**

Date: \_\_\_\_\_

Initials: \_\_\_\_\_

Check #: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Parcel ID: \_\_\_\_\_

Permit #: \_\_\_\_\_

Finalized: \_\_\_\_\_

Site Address:

Owner Information:

Name \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

Contractor Information:

Name \_\_\_\_\_

Phone # \_\_\_\_\_

Email \_\_\_\_\_

| ITEM                                                                                                       | UNITS | PRICE PER | TOTAL   | ITEM                                                | UNITS | PRICE PER | TOTAL | ITEM                                                  | UNITS | PRICE PER | TOTAL   |
|------------------------------------------------------------------------------------------------------------|-------|-----------|---------|-----------------------------------------------------|-------|-----------|-------|-------------------------------------------------------|-------|-----------|---------|
| Application Fee/Rough In Inspection                                                                        | 1     | \$50.00   | \$50.00 | Connection Building Drain - Building Sewer          |       | \$5.00    |       | Water Distributing Pipe System Over 2"                |       | \$30.00   |         |
| Mobile Home Park Site                                                                                      |       | \$5 Each  |         | Sewer (sanitary, storm, or combined) - Less than 6" |       | \$5.00    |       | Reduced Pressure Zone Back-Flow Preventer             |       | \$5 Each  |         |
| Fixtures, Floor Drains, Special Drains, Water Connected Appliances, Domestic Water Treatment and Filtering |       | \$5 Each  |         | Sewer (sanitary, storm, or combined) - 6"+          |       | \$25.00   |       | Domestic Water Treatment and Filtering Equipment Only |       | \$5.00    |         |
| Stacks (soil, waste, vent and conductor)                                                                   |       | \$3 Each  |         | Manholes, Catch Basins                              |       | \$5 Each  |       | Special/Safety Inspection                             |       | \$50.00   |         |
| Sewage Ejector, Sumps                                                                                      |       | \$5 Each  |         | Water Distributing Pipe System 3/4"                 |       | \$5.00    |       | Additional Inspection                                 |       | \$50.00   |         |
| Sub-Soil Drains                                                                                            |       | \$5 Each  |         | Water Distributing Pipe System 1"                   |       | \$10.00   |       | Medical Gas System                                    |       | \$45.00   |         |
| Water Service - Less than 2"                                                                               |       | \$5.00    |         | Water Distributing Pipe System 1 1/4"               |       | \$15.00   |       | Starting Work Without a Permit                        |       | \$100.00  |         |
| Water Service - 2"-6"                                                                                      |       | \$25.00   |         | Water Distributing Pipe System 1 1/2"               |       | \$20.00   |       | Misc. Items                                           |       | \$30.00   |         |
| Water Service - Over 6"                                                                                    |       | \$50.00   |         | Water Distributing Pipe System 2"                   |       | \$25.00   |       | Final Inspection                                      | 1     | \$50.00   | \$50.00 |

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 subject to civil fines.

TOTAL FEE = \$

**INSTRUCTIONS FOR COMPLETING APPLICATION**

**GENERAL:** Plumbing 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 Plumbing 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.**

**HOMEOWNER AFFIDAVIT**

I hereby certify the plumbing 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 Plumbing Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Twp. Plumbing Inspector. I will cooperate with the Twp. Plumbing Inspector and assume the responsibility to arrange for necessary inspections.

**\*APPLICANT SIGNATURE AND DATE REQUIRED ON THE BACK SIDE OF THIS FORM\***

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. \_\_\_\_\_ OR Plans Not Required ☐

FEE CLARIFICATION

**MOBILE HOME UNIT SITE:** WHEN item is used for sewer excavations in a new park, the permit application should include the application fee plus the number of unit sites. WHEN setting a mobile home in a park, or a mobile or modular home on private property, a permit should include the application fee, a sewer or building drain, and a water service or water distribution pipe.

**FIXTURES, FLOOR DRAINS, SPECIAL DRAINS, & WATER CONNECTED APPLIANCES INCLUDE:**

- |                      |                          |                     |                   |                              |
|----------------------|--------------------------|---------------------|-------------------|------------------------------|
| • Water Closets      | • Emergency Shower       | • Dishwasher        | • Water Softener  | • Water Outlet/Connection:   |
| • Bathtub            | • Garbage Grinder        | • Refrigerator      | • Floor Drain     | Make-up Water Tank           |
| • Lavatories         | • Water Outlet Cooler    | • Bed Pan Washer    | • Roof Drain      | • Water Outlet/Connection:   |
| • Shower Stall       | • Ice Making Machine     | • Drinking Fountain | • Grease Trap     | Heating system               |
| • Laundry Tray       | • Water Connection Still | • Condensate Drain  | • Starch Trap     | • Water Outlet/Connection:   |
| • Urinal             | • Slop Sink              | • Washing Machine   | • Plaster Trap    | Filters                      |
| • Sink               | • Bidet                  | • Acid Waste Drain  | • Water Connected | • Connection to Sprinkler    |
| • Emergency Eye Wash | • Cuspidor               | • Embalming Table   | Dental Chair      | System                       |
|                      |                          |                     |                   | • Water Connected Sterilizer |

**DOMESTIC WATER TREATMENT AND FILTERING EQUIPMENT:** A license is not required for the installation of domestic water treatment and filtering equipment that requires modification to an existing cold water distribution supply and associated waster piping in buildings if a permit is secured, required inspection performed, and the installation complies with the applicable code. If the enforcing agency determines a violation exists, it shall be corrected by the responsible installer. The permit application shall include the application fee, the number of water treatment devices recorded in item **DOMESTIC WATER TREATMENT AND FILTERING EQUIPMENT (See item Fixtures Floor Drains, Etc.)** for \$5.00 each, and the appropriate water distribution pipe (system) size fee.

**MEDICAL GAS SYSTEMS** shall include the application fee, one Special/Safety Inspection-Medical Gas System - **Domestic water treatment and filtering equipment** - and the estimated number of **additional inspections**.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

Final Inspection

Date

Inspection (circle one)

PASSED

FAILED

If Failed, what did not pass inspection?

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Plumbing Inspector Signature*

\_\_\_\_\_  
*Date*