

TOWNSHIP OF SPRINGFIELD

Operated by Code Enforcement Services
 6401 Citation Dr., Suite E * Clarkston, MICHIGAN 48346
 OFFICE HOURS: Monday - Thurs. 9:00 A.M. TO 3:00 P.M.
 CLOSED - Friday
 BLDG DEPT PHONE #: (248) 625-8480

TYPE OF PERMIT: (CIRCLE ONE) HOMEOWNERS PERMIT CONTRACTOR
APPLICATION FOR PLUMBING PERMIT
 Building, Mechanical or Electric Permits may also be required.

JOB LOCATION: LOT # _____ SIDWELL # _____

STREET ADDRESS	TOWN/CITY/ZIP	BUILDER/HOMEOWNER	
NAME	PRESENT ADDRESS		
CITY	STATE	ZIP	PHONE #

ONE FAMILY RESIDENTIAL NEW CONSTRUCTION (Use square footage on Bldg. Permit)	
#	COST
Up to 2000 sq. ft.	\$200
2001 to 2500 sq. ft.	\$225
2501 to 3000 sq. ft.	\$250
3001 to 3500 sq. ft.	\$275
3501 to 4000 sq. ft.	\$300

For each 1000 sq.ft.(or increment/thereof) \$ 50

ONE FAMILY UNIT RATE - Accessory Buildings, Additions, Remodel and Repair, Commercial Unit Rates

ITEM	FEE	COST
Base fee	\$50	\$75
Stacks and Vents	\$ 7 ea	\$10
Water Closets	\$ 7 ea	\$10
Jacuzzi, whirlpool or hot tub	\$ 7 ea	\$10
Sinks and Lavs	\$ 7 ea	\$10
Laundry Tray	\$ 7 ea	\$10
Floor Drains	\$ 7 ea	\$10
Sump Pump, Water Heater	\$ 7 ea	\$10
Hose Bibs	\$ 7 ea	\$10
Pumps	\$ 7 ea	\$10
Water Softener	\$ 7 ea	\$10
Miscellaneous Fixtures (Anything not listed)	\$ 7 ea	\$10
Sump	\$ 7 ea	\$10
Dishwasher	\$ 7 ea	\$10
Disposal	\$ 7 ea	\$10
Urinals	\$ 7 ea	\$10
Drinking Fountains	\$ 7 ea	\$10
Underground Plumbing	\$10 ea	\$25
Under slab if separate inspection	\$30	\$30
Fire Suppression - per sprinkler head	\$ 3 ea	\$ 3
Lawn Sprinkler	\$ 50	\$50
Dental Chair	\$ 6 ea	\$10
Water Distribution System - based on 1 st 200 ft.		
Up to 1 ½"	\$25	\$35
2" to 3"	\$35	\$45
Over 3"	\$55	\$60
Each additional 100' (any size)	\$10	\$10

OTHER: \$75/HR FOR SPECIAL REQUESTS OR ITEMS NOT OTHERWISE COVERED. 1 HOUR MINIMUM

MINIMUM PERMIT FEE **\$50.00**
WORK DONE WITHOUT PERMIT (FOR WORK DONE AFTER INSPECTION SHOULD HAVE BEEN MADE) DOUBLE FEES.

ANNUAL FILING FEE (Contractor's Only) **\$25.00** _____

ISSUED BY _____ DATE _____ TOTAL COST _____
REINSPECTION \$40.00 PAYABLE PRIOR TO ANY REINSPECTION BEING PERFORMED

*****ALL CHECKS MUST BE MADE PAYABLE TO CHARTER TOWNSHIP OF
SPRINGFIELD*****

INDICATE WHO THE APPLICANT IS:

CONTRACTOR MASTER HOMEOWNER WATER TREATMENT INSTALLER

FOR HOMEOWNERS PERMIT ONLY ***

I hereby certify that I am the owner/occupant of the property described on this permit application, and that I shall complete the work myself in accordance with the applicable Springfield Township Ordinance. I understand that I am completely responsible for all work performed, compliance with applicable codes and regulations and for corrections, changes or modifications requested by the Township. No work shall be enclosed, covered up, or put into operation until all inspections have been made and approval has been given from the Springfield Township Building Department. I will co-operate with the Township Inspectors and assume the responsibility to arrange for necessary inspections.

SIGNATURE OF HOMEOWNER

PRINT NAME

DATE

CONTRACTOR INFORMATION

**** (HOMEOWNER INFORMATION -IF PERMIT OBTAINED BY HOMEOWNER**

Name _____ Address _____

Phone Number _____ Fax Number _____

License # _____ Exp Date: _____

Federal Employer ID# _____

Workers Comp Insurance Carrier or reason for exemption _____

Michigan Employment Security Commission Employer # or reason for exemption _____

"Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.23a 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 structure. Violators of Section 23a are subject to civil fines.

X _____
PRINT NAME SIGNATURE DATE