APPLICATION FOR MECHANICAL PERMIT SAGINAW CHIPPEWA INDIAN TRIBE **TRIBAL BUILDING CODE ENFORCEMENT**

7070 E. Broadway Mt. Pleasant, MI 48858 Phone: (989) 775-4014

Heat System

Final Inspection

Mobile/Modular

TOTAL

□ NEW

REMODEL Description of work:

□ COMMERCIAL □ RESIDENTIAL

COST NO. BASE FEE (INSPECTION NOT INCLUDED) \$22 1 \$25 _Gas __Oil __HVAC __Heat Pump __Solid Fuel Fireplace and vent Chimney (factory Bui Dampers (flue, vent,

		Signature
* Additional Inspections	\$22	
Fire Suppression \$.50/head (minimum \$15) NOTE: All fire suppression plans & specs must be sent to the Tribal Fire Dept. for approval prior to starting work		Cell #
Chillers/Cooling Towers/Compressors	\$23	Telephone #
Commercial Hoods	\$15	MESC Employer #
Humidifiers, Heat Recovery, VAV Box, Unit Venti- lators	\$8	Employer ID #
Tanks (LPG/Fuel Oil) includes piping to bldg. entry	\$15	Worker Disability/C
Air Handling (over 10,000 CFM)	\$45	Expiration Date
Air Handling (1000 to 10,000 CFM	\$15	State License #
Infrared/Terminal Unit Heaters	\$15	
Gas Piping (each outlet)	\$5	City/State/Zip
Water Heater & Vent	\$20	Business Address
Central A/C, Split Refrigeration, Evap. Cooling	\$20	Contractor
Bath/Kitchen Fans (under 1000 CFM)	\$5	APPLICATION
Duct Systems/Hydronic piping	\$19	City/State/Zip
Dampers (flue, vent, fire)	\$5	Mailing Address
Chimney (factory Built) Chimney re-lining, B Vent	\$19	Telephone #
Fireplace and vent	\$20	

\$22

\$30

\$

1

22.00

OFFICE USE ONLY

Permit No.:

Date:

This application shall become incorporated as part of the permit issued and only authorizes the items of work as herein applied for.

Please fill out application completely, incomplete applications may be returned.

APPLICATION FOR:

FEE

22.00

Homeowner
Job Site Address
City/State/Zip
Telephone #
Mailing Address
City/State/Zip
APPLICATION BY:
Contractor
Business Address
City/State/Zip
State License #
Expiration Date
Worker Disability/Comp Ins. Co.
Employer ID #
MESC Employer #
Telephone #
Cell #

(Contractor, Homeowner**)

****NOTE:** Homeowner by signing above you swear that you are personally doing the work as stated on this application. You agree that you will do the work in accordance with any and all applicable codes, laws and ordinances and will obtain approval from the Building Inspection Department for your completed work.

WORK MUST BE INSPECTED BEFORE COVERED

*Please indicate the number of additional inspections anticipated for this project along with the appropriate fee amounts.