

Albee Township

SAGINAW COUNTY

989-770-4844 • FAX 989-770-5001 • 10645 EAST ROAD • BURT, MICHIGAN 48417

ELECTRICAL PERMIT APPLICATION

AUTHORITY ACT 230, PA 1972 as amended	COMPLETION Installation shall not be started until application is filed	PERMIT NUMBER
PENALTY Failure to provide information may result in a written order to stop construction		
LARA is an equal opportunity employment program. Auxiliary aids services and other reasonable accommodation are available upon request to individuals with disabilities.		ISSUE DATE

I. PROJECT OR FACILITY INFORMATION

NAME OF OWNER/AGENT	TELEPHONE NUMBER (HOME)		
STREET ADDRESS & JOB LOCATION (STREET NUMBER AND NAME)	CITY	ZIP CODE	COUNTY
NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED			
<input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWNSHIP OF:			

II. CONTRACTOR/HOME OWNER INFORMATION

INDICATE WHO THE APPLICANT IS	<input type="checkbox"/> HOMEOWNER	<input type="checkbox"/> CONTRACTOR	CONTRACTOR LICENSE #	EXP DATE
NAME OF APPLICANT				
ADDRESS (STREET NUMBER AND NAME)	CITY	STATE	ZIP CODE	
E-MAIL ADDRESS	TELEPHONE #			
FEDERAL EMPLOYER ID # (OR REASON FOR EXEMPTION)	WORKERS' COMP INS CARRIER (OR REASON FOR EXEMPTION)	MESC EMPLOYER NUMBER (OR REASON FOR EXEMPTION)		

III. APPLICANT SIGNATURE

Section 23a of the state construction code act of 1972, 1972 PA 230, being section 125, 1523a 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 a residential structure. Violators of Section 23a are subjected to civil fines.

SIGNATURE OF LICENSEE CONTRACTOR OR HOMEOWNER (HOMEOWNER'S MUST ALSO SIGN SECTION IV: HOMEOWNER'S AFFIDAVIT BELOW)	DATE
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IV. HOMEOWNER AFFIDAVIT

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 installed in accordance with the Uniform Electrical Code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the Township Electrical Inspector. I will cooperate with the Township Electrical Inspector and assume the responsibility to arrange for necessary inspections

SIGNATURE OF HOMEOWNER	DATE
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V. TYPE OF JOB

<input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> NEW	<input type="checkbox"/> SPECIAL INSPECTION	A plan review may be required before work is started, on any building other than a single family dwelling less than 3,500 sq ft. Have plans been submitted for plan review? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT REQUIRED
<input type="checkbox"/> OTHER	<input type="checkbox"/> ALTERATION	<input type="checkbox"/> MOBILE HOME SETUP <input type="checkbox"/> MODULAR HOME SETUP	
DESCRIBE			

	PER UNIT	NO.	TOTAL FEE
1. PERMIT BASE FEE - plus permit unit charge	\$75.00		
2. Services: Thru 200 Amp.	\$10.00		
3. Over 200 Amp. thru 600 Amp.	\$15.00		
4. Over 600 Amp. thru 800 Amp.	\$20.00		
5. Over 800 Amp.	\$25.00		
6. Circuits	\$8.00		
7. Lightning Fixtures - per 25 & fraction thereof	\$6.00		
8. Dishwasher, Garbage Disposal & Range Hood	\$5.00		
9. Furnace - Unit Heater	\$5.00		
10. Electrical Heating Units (baseboard)	\$4.00		
11. Power Outlets (including ranges, dryers, etc.)	\$7.00		
12. Signs, per circuit	\$10.00		
13. Feeders-Bus Ducts, etc-per 50 ft & fraction thereof	\$6.00		
14. Mobile Home Park Site	\$6.00		

	PER UNIT	NO.	TOTAL FEE
15. Recreational Vehicle Park Site	\$4.00		
16. K.V.A. & H.P. - Each Unit up to 20 K.V.A. or H.P.	Well Pump \$6.00		
17. 21 to 50 K.V.A. or H.P.	\$10.00		
18. 51 K.V.A. or H.P. and over	\$12.00		
19. Fire Alarm - up to 10 stations and horns	\$50.00		
20. 11 to 20 stations and horns	\$60.00		
21. over 20 stations and horns - each	\$5.00		
22. Hourly Fee	\$30.00		
23. Special Inspection pertaining to sale of property	\$40.00		
24. Final Inspection Fee	\$75.00		
25. Certification Fee	\$10.00		
26. Additional Inspection Fee	\$50.00		
TOTAL		\$	

Make Checks Payable to: Albee Township

AUTHORIZATION BY ALBEE TOWNSHIP OFFICIAL _____	PHONE # _____
ELECTRICAL INSPECTOR _____	PHONE # _____