

Clarence Township

27052 R. Drive North

Albion, Mi 49224

517-857-2288, Fax 517-857-2488

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

I. Job Location

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 AND JOB LOCATION (Street Number and Name)		NAME OF CITY, VILLAGE OR TOWNSHIP IN WHICH JOB IS LOCATED	
		<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Township <b>OF:</b>	
		COUNTY	

II. Contractor / Homeowner Information

INDICATE WHO THE APPLICANT IS		NAME		STATE LICENSE NUMBER		EXPIRATION DATE	
<input type="checkbox"/> Contractor <input type="checkbox"/> Homeowner							
ADDRESS (Street Number and Name)				STATE REGISTRATION NUMBER		LOCAL LICENSING JURISDICTION	
CITY		STATE		ZIP CODE		LOCAL LICENSE NUMBER	
						EXPIRATION DATE	
TELEPHONE NUMBER (Include Area Code)				FEDERAL EMPLOYER ID NUMBER (or reason for exemption)			
WORKERS COMPENSATION INSURANCE CARRIER (or reason for exemption)				UIA NUMBER (or reason for exemption)			

III. Type of Job

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

IV. 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:**

- When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area.
- 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 rating of the service or feeder in ampere? \_\_\_\_\_

What is the building size in square footage? \_\_\_\_\_

**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.

BCC Plan Review Project No. \_\_\_\_\_  Plans Not Required

V. 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.**

SIGNATURE OF CONTRACTOR OR HOMEOWNER (Homeowner signature indicates compliance with Section VI. Homeowner Affidavit)	DATE

VI. 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 Michigan Electrical Code and **shall not be enclosed, covered up, or put into operation** until it has been **inspected and approved** by the State Electrical Inspector. I will cooperate with the State Electrical Inspector and assume the responsibility to arrange for necessary inspections.

Complete Application on Back Side

