

SAFEbuilt, INC.
 107 S. CAPITAL AVE., P.O. BOX 190, ATHENS, MI 49011
 OFFICE: 269-729-9244 FAX: 269-729-9254
 INSPECTION SCHEDULING: 877-721-9266
 EMAIL: athensmi@safebuilt.com
 WEBSITE: www.cornerstonemi.net
 Authority: 1972 PA 230
 Completion: Mandatory to obtain permit
 Penalty: Permit cannot be issued

Permit # _____
 Fee _____
 Method of Payment _____
 Receipt # _____

**ALL PERMITS: ADD 10% TEKONSHA TOWNSHIP PROCESSING FEE
 MAKE CHECK PAYABLE TO TEKONSHA TOWNSHIP**

TEKONSHA TOWNSHIP RESIDENTIAL ELECTRICAL PERMIT APPLICATION

| | | | |
|---|--|---|---|
| I. Job Location | | | |
| JOB Address | | Has a building permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required | |
| Name of Owner | | Name of City, Village or Township in which job is located: (x)TEKONSHA TOWNSHIP | County CALHOUN |
| Owner Telephone | | | |
| II. Contractor/Homeowner Information | | | |
| <input type="checkbox"/> Contractor <input type="checkbox"/> Owner | | Contractor License # | Expiration Date |
| Address | | Master License # | Expiration Date |
| City | State | Zip | Email |
| Telephone | Work/Cell | | Fax |
| Federal Employer ID # (or reason for exemption) | Workers Comp Ins Carrier (or reason for exemption) | | MESC # (or reason for exemption) |
| III. Type of Job | | | |
| Power Company _____ Request/Work Order # _____ | | | |
| Single Family <input type="checkbox"/> New <input type="checkbox"/> Alteration | <input type="checkbox"/> Service Only | <input type="checkbox"/> Premanuf. Home Setup (State Approved) | <input type="checkbox"/> Accessory Building |
| | <input type="checkbox"/> Special Inspection | <input type="checkbox"/> HUD Mobile Home Setup | <input type="checkbox"/> Other _____ |
| IV. Plan Review Required | | | |
| Plans and specifications must be submitted when the wiring or alteration to an electrical system is over 400 amps and is in excess of 3,500 square feet in all buildings. | | | |
| What is the rating of the service or feeder in amperes? _____ | | What is the building size in square feet? _____ | |
| Have plans been submitted? ____yes ____no ____not required | | | |
| Plans are required for all building types and shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to Act No. 299 of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal, except: | | | |
| <ol style="list-style-type: none"> 1. When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area 2. Work completed by a governmental subdivision or state agency costing less than \$15,000.00 | | | |
| V. 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 herby 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 electrical inspector. I will cooperate with the electrical inspector and assume the responsibility to arrange for necessary inspections. | | | |

TEKONSHA TOWNSHIP RESIDENTIAL ELECTRICAL PERMIT FEE & ITEMIZATION GRID

Permit fee is based upon the number of inspections required (\$73.00 per inspection + Township’s 10%)

Multiply Number of **Inspections** from Grid Below ___ x \$73.00/each + 10% = ____ (Total Permit Fee)

PLEASE USE THE GRID BELOW TO ITEMIZE THE JOB - ITEMIZATION IS REQUIRED

| | QTY | | QTY |
|---|-----|--|-----|
| Service | | K.V.A & H.P. | |
| through 200amp | | Units up to 20 | |
| over 200amp, through 600amp | | Units 21 to 50 K.V.A. or H.P. | |
| over 600amp, through 800amp | | Smoke Detectors | |
| over 800 amp, through 1200amp | | Up to 10 devices | |
| Circuits | | 11 to 20 devices | |
| Lighting Fixtures (per 25) | | Data/Telecommunication Outlets | |
| Dishwasher | | 1-19 devices | |
| Furnace-Unit Heater | | 20+ devices | |
| Air Conditioner | | MISC. (INDICATE BELOW ITEMS(S) BEING INSTALLED) | |
| Water Heater | | | |
| Subpanel | | Inspections (Add QTY column & transfer # above) | |
| Electrical-Heating Units (baseboard) | | Temporary Service | |
| Power Outlets (ranges, dryers, etc) | | Service | |
| Feeders-Bus Ducts, etc. -per 50 feet | | Underground | |
| Mobile Home Park Site | | Rough-In | |
| Conduit Only or Grounding Only | | Re-Rod Grounding | |
| Pool Bonding/Whirlpool Tub | | Special/Safety Inspection | |
| Generator | | Final | |
| Solar Panel(s) | | Additional Inspection | |
| | | Other – Indicate Here: _____ | |

THIS APPLICATION IS FOR RESIDENTIAL ELECTRICAL PROJECTS

ISSUED PERMITS EXPIRE 180 DAYS FROM THE ISSUED DATE. NO REFUNDS WILL BE GIVEN FOR EXPIRED PERMITS. AN ADMINISTRATIVE FEE OF \$73.00 (+ TOWNSHIP’S 10% PROCESSING FEE) WILL BE RETAINED FOR CANCELED/TERMINATED PERMITS OR APPLICATIONS.

WORK THAT IS STARTED WITHOUT A PERMIT MAY BE SUBJECT TO A \$73.00 (+TOWNSHIP’S 10% PROCESSING FEE) VIOLATION FEE, IN ADDITION TO THE REQUIRED PERMIT FEE

REINSPECTIONS OF DOCUMENTED CODE VIOLATIONS ARE SUBJECT TO A \$73.00 (+ TOWNSHIP’S 10% PROCESSING FEE) REINSPECTION FEE - PAYABLE PRIOR TO SCHEDULING THE REINSPECTION

MAKE CHECK PAYABLE TO TEKONSHA TOWNSHIP

RETURNED CHECKS ARE SUBJECT TO FEES IN ACCORDANCE WITH TEKONSHA TOWNSHIP’S RETURNED CHECK POLICY