



Bloomfield Township
P.O. Box 489
4200 Telegraph
Bloomfield Hills, MI 48303-0489
Phone (248) 433-7715

Inspection Requests: www.bsaonline.com
Website: <http://www.bloomfieldtp.org>

Permit # _____

Issue Date _____

APPLICATION FOR MECHANICAL PERMIT

Address of Job _____ Lot # _____ Sidwell # _____

Subdivision _____ Applicant/Contractor _____

Email _____ Telephone _____ Fax _____

Address _____ City _____ State _____ Zip _____

Property Owner _____ Telephone _____

- New Construction Addition Remodel Repairs Replacement Generator

	Fee	No.	Amount
<u>Application Fee</u>	\$35	1	\$35
<u>Base Fee</u>	\$50	1	\$50

New Construction

New Construction (one furnace, one A/C w/duct work*)	200	_____	_____
Each additional # ___ furnace and/or # ___ A/C*	80	_____	_____
Prefab fireplace	100	_____	_____
Gas-line (includes pressure test)	80	_____	_____

Addition/Alteration/Replacement

Single item inspection (Description _____)	50	_____	_____
Installation of # ___ furnace and/or # ___ A/C per unit*	50	_____	_____
Duct alterations	100	_____	_____
Prefab fireplace (includes rough and final)	100	_____	_____
Gas-line (includes pressure test)	80	_____	_____
Air handlers / Unit heaters	50	_____	_____
Processed Piping	120	_____	_____
Boiler installation (must provide boilers license for over 500,000 BTU's)	50	_____	_____
Re-inspection Fee	75	_____	_____
Mechanical Registration	15	_____	_____

Commercial Fees – Assessed at plan review by the inspector – per insp. 250 _____

Description _____

(Call 248-433-7715 for fees)

Self-contained HVAC units, per unit 50 _____

Total Due \$ _____

*Indicate NEW exterior equipment location: Rear Yard Side Yard Secondary Front Yard Roof .

***Ground Mounted Mechanical Location:** **Ground** **Wall/Mini Split**

For ground equipment locations, you must provide a detailed site plan indicating all streets, lot lines, orientation of home, equipment location, setback distance from property line(s), distance from wall of building to equipment, screening requirements (placement, material and height) & subdivision comments. For commercial roof top equipment locations, you must provide a detailed roof plan, distance from outer wall of building to equipment, screening requirements (placement, material and height). Please note that all equipment must be screened from view per the Codes of the Charter Township of Bloomfield, Chapter 42, Article IV, Sec. 42-5.1. Final inspection will not be approved until screening is installed.

Applicants Signature _____ Date _____ Company Name _____



Bloomfield Township
 P.O. Box 489
 4200 Telegraph
 Bloomfield Hills, MI 48303-0489
 Phone (248) 433-7715

Inspection Requests: www.bsaonline.com
 Website: <http://www.bloomfieldtwp.org>

APPLICATION FOR MECHANICAL PERMIT – 2

STATE OF MICHIGAN REQUIRED INFORMATION: (Must provide copies of licenses)

License # _____ Issued by: _____ Expiration Date: _____

Federal employer I.D. # or reason for exemption: _____

Worker's Comp. Insurance carrier or reason for exemption: _____

MESC Employer # or reason for exemption: A permit remains valid as long as work is progressing and inspections are requested and conducted. A permit shall become invalid if the authorized work is not commenced within 180 days after issuance of the permit or if the authorized work is suspended or abandoned for a period of 180 days after the time of commencing the work. A PERMIT WILL BE CLOSED WHEN NO INSPECTIONS ARE REQUESTED AND CONDUCTED WITHIN 180 DAYS OF THE DATE OF ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION. CLOSED PERMITS CANNOT BE REFUNDED.

“Section 23a of the Michigan 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 able to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.”

Signature of Applicant _____ Date: _____

Company Name _____

Draw the location of ground-mounted mechanical or location of wall mounted unit/mini split below. Add any additional locations of roads as needed. Evergreen screening to be planted at the height of the unit at the time of planting is required for all units.

Replacement equipment ONLY: Contractor to submit a photograph showing the following: existing unit or equipment location in relation to the building, existing utility hook-up, and existing screening per Township Ordinance. If the photograph submitted is not clear, a pre-site inspection will be required and performed.

