

**LAKETOWN TOWNSHIP**

4338 Beeline Rd, Holland MI 49423

Phone: (616) 335.3050 Fax: (616) 396.5441

Website: [www.laketowntwp.org](http://www.laketowntwp.org) E-mail: [office@laketowntwp.org](mailto:office@laketowntwp.org)**Inspector: Gordon Bosch (616) 396.1448**

Permit No. \_\_\_\_\_

Bldg. Permit No. \_\_\_\_\_

Parcel No. \_\_\_\_\_

Date \_\_\_\_\_ Ck # \_\_\_\_\_

Contractor E/F/M/P \_\_\_\_\_ Insp E/F \_\_\_\_\_

**ELECTRICAL PERMIT APPLICATION**

Owner's Name \_\_\_\_\_ Owner's Phone No. \_\_\_\_\_

Job Address \_\_\_\_\_

Utility Company \_\_\_\_\_ Notification No. \_\_\_\_\_

**CONTRACTOR INFORMATION**

Business Name \_\_\_\_\_ Office Phone No. \_\_\_\_\_

E-Mail \_\_\_\_\_ Fax No. \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor License No. \_\_\_\_\_ Expiration Date \_\_\_\_\_ Federal ID No. \_\_\_\_\_

MESC Employer No. \_\_\_\_\_ Worker's Comp. Carrier \_\_\_\_\_

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

Section 23A of the State Construction Code Act #230 of the Public Acts of 1972, 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 subject to civil fines.

**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 Electrical Inspector. I will cooperate with the Electrical Inspector and assume the responsibility to arrange for necessary inspections.

**WORK DESCRIPTION:** \_\_\_\_\_**TYPE OF BLDG:** RES \_\_\_\_\_ COMM \_\_\_\_\_ OUTBLDG \_\_\_\_\_ **TYPE OF JOB:** NEW \_\_\_\_\_ REMODEL \_\_\_\_\_**INSPECTIONS:** TEMP \_\_\_\_\_ SERVICE \_\_\_\_\_ ROUGH \_\_\_\_\_ FINAL \_\_\_\_\_ OTHER \_\_\_\_\_**FEE: \$65 per Inspection** TOTAL NUMBER OF INSPECTIONS \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

Additional charges will be billed if Inspections cannot be completed upon request due to: 1) Locked building 2) Code Violation 3) Incomplete Work

If any electrical work is started before permit is obtained from the township, an Administration/Investigation Fee shall be paid to the township before a permit is issued.

**APPLICANT MUST CALL FOR INSPECTOR APPROVAL FOR WORK TO BE CONSIDERED COMPLETE**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

Approved Signature \_\_\_\_\_

Date \_\_\_\_\_