APPLICATION FOR PROPANE TANK PERMIT

Arenac County Building Department 120 N. Grove, PO Box 724, Standish, MI 48658 Ph. 989-846-9791 Fax 989-846-9188

Authority: 1972 PA 230
Completion: Mandatory to obtain permit

		Penalty:	Permit	can not be issued
Job Site Address	Nearest Cross Streets			
Township, City or Village	Tax ID#			
Owner Information	Licensed Mechanical Contractor Information			
Name				
Address	_ Address			
City	City			
State & Zip	State & Zip			
Phone #	_ Phone #			
Michigan Mechanical Contractor License #_	Exp. Date			
Tanks: A homeowner must own tank to install. If homeowner does not own tank, a lie	censed mechanical contractor must install tank.	-15		3)
Type of Job: () Above Ground Tank		Fee	# Items	Total
() Below Ground Tank	1. Administration fee, Non-Refundable	\$35.00	1	\$35.00
	2. Tanks - Above or under ground-eaIncludes gas piping	\$35.00		
	Total Fees			M 47
APPLICANT SIGNATURE: Section 23a of the State Construction Act of 1972 licensing requirements of this state relating to persons who are to perform wo subject to civil fines.				
HOMEOWNER AFFIDAVIT: I hereby certify the mechanical work described o or about to occupy. All work shall be installed in accordance with the Michigar has been inspected and approved by the Arenac County Mechanical Inspector arrange for necessary inspections.	n Mechanical Code and shall not be enclosed, cove	ered up or pu	ut into op	peration until it
Signature of Mechanical Contractor or Homeowner (Home	owner signature indicates compliance	with Hon	neown	er Affidavit)
GENERAL: Mechanical work shall not be started until the application the Michigan Mechanical Code. No work shall be concealed until it hap providing as much advanced notice as possible. The inspector will not the inspector will not be a specific to the inspector will not be applicable.	as been inspected. When ready for an inspec			
Expiration of Permit: A permit remains valid as long as work permit shall become invalid if the authorized work is not commauthorized work is suspended or abandoned for a period of sizEE CLOSED WHEN NO INSPECTIONS ARE REQUESTED A ISSUANCE OR THE DATE OF A PREVIOUS INSPECTION.	nenced six months after the issuance of t x months after the time of commencing the AND CONDUCTED WITHIN SIX MONTH	he permit ne work. <i>I</i> HS OF TH	or if th A PERI IE DAT	ne MIT WILL FE OF
Reviewed by: Code Official Signature Date	Circle One: MI Residential MI Mechanica	al Code C	ode Cy	rcle
This Office will not discriminate against any individual or group because or rac	o soy roligion ago national origin marital status o	disabilities o	r politics	l boliofe if

This Office will not discriminate against any individual or group because or race, sex, religion, age, national origin, marital status, disabilities or political you need help with reading, writing, hearing, etc. under the Americans with Disabilities Act, you may make your needs known to this office.

This institution is an equal opportunity provider.

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