

RESIDENTIAL ELECTRICAL PERMIT

CITY OF LESLIE
BUILDING
DEPARTMENT 602 W
Bellevue
P.O. Box 496
Leslie, MI 49251
269-629-0600
800-627-2801

Date ____ / ____ / ____

CITY OF LESLIE

Permit # : _____

Job Location: _____ Property Tax No: _____

Owner: _____ Phone Number: _____

Address: _____ City/State/Zip: _____

Owners Email: _____

Which side of the road: ☐ North ☐ South ☐ East ☐ West

Between (closest roads) _____ & _____

Fee Schedule

	ITEMIZATION	No.	
		xxx.	
<input type="checkbox"/> Single Inspection \$77.00	Services: Thru 200amp.		
<input type="checkbox"/> Special/Safety Inspection \$77.00	200 amp thru 600 amp		
<input type="checkbox"/> Addition Remodel \$160 (Two inspections)	Circuits		
<input type="checkbox"/> Addition Remodel w/Service Upgrade (Three inspections) \$215	Lighting Fixtures -- per 25 and fraction of		
<input type="checkbox"/> New Residence \$215 (Three Inspections)	Dishwasher, Garbage disposal & range hood		
	Furnace -- unit heater		
	Electrical heating units (baseboard)		
	Power Outlets (including ranges,dryers, ect.)		
	Signs -- per circuit		
	Feeders		

If a dwelling unit is 3,500 square feet or greater plans must be submitted with an Application for Plan Examination and the appropriate fee before a permit can be issued.

Plans are not required for the following:

1. When the electrical system rating does not exceed 400 amps and the building is not over 3,500 square feet in area, unless it is determined to be required by the code official.

If work being performed as described above, check box "Plans Not Required."

Plans Not Required

☐

COST OF PERMIT: \$ _____

Make checks payable to

CITY OF LESLIE

Building Dept. Approval By:

Description of work:

Additional Notes:

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Contractor Name:		Phone #		Fax #	
Address		City		State	Zip
Federal I.D. No/Social Security No.		MESC Employer No:			
Contractor License No.		Exp. Date		Worker's Compensation Insurance Carrier	
Name of Master Electrician		Master License No.		Exp. Date	
Master Electrician Business Address		City		State	Zip
If exempt from any of the above, explain here:		Email: (REQUIRED)			
Section 23A of the state construction code act of 1972, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of the state relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23 A are subjected to civil fines.					

☐ I am/will be the owner and occupant of the premises on which the described Installation is proposed and will be doing the proposed work myself. I will not allow anyone to do any work.

Expiration of Permit: 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.**

HOME OWNERS AFFIDAVIT and SIGNATURE

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for necessary and timely inspections.

Signed: _____ Date: _____

AGENT/CONTRACTOR'S AFFIDAVIT and SIGNATURE

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: _____ Date: _____