

**HEATING & COOLING (MECHANICAL) PERMIT APPLICATION
CITY OF CLAWSON
DEPARTMENT OF BUILDING & PLANNING
425 N. MAIN
CLAWSON, MI 48017
248-435-4500 – EXT. 121**

Date: _____

Project Information

Job Address: _____ Suite: _____ Lot: _____
Parcel ID #: _____

Description of work that will be done: _____

Fee schedule is on our web site at: cityofclawson.com
Click on: Government, Departments, Building/Engineering, Building Department Schedule of Fees

Applicant Information

Name: _____ Phone: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip: _____
Cont. License # _____ Federal ID _____ MESC # _____
Ins. Carrier (Liab) _____ Worker's Comp. _____

(If Contractor pulling permit – A certificate of insurance copy must be submitted along with copy of contractor's license & driver's license).

Owner Information:

Name: _____ Phone: _____ Fax: _____
Address: _____ City: _____ State: _____ Zip: _____

Homeowner Affidavit:

I hereby certify that the 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 State of Michigan Mechanical Code and shall not be enclosed, covered up or occupied until it has been inspected and approved. I will cooperate with the Mechanical Inspector and assume all responsibility to arrange for necessary inspections.

Section 23a of the state construction code act of 1972, 1972PA 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 subject to civil fines.

Signature of Applicant: _____ Date: _____
(Owners signature indicates compliance with Homeowner's Affidavit)