

Permit #

CITY OF PLYMOUTH
ELECTRICAL PERMIT APPLICATION

INSPECTION HOT LINE 734-738-0289
 201 S. Main Street Plymouth, MI 48170
 Ph. 734-453-1234 ext. 232
www.plymouthmi.gov

I. Site/Project Information

Site Address	Date of Application
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Name of Property Owner		Phone Number	
Mailing Address		Email Address (Required)	
City	State	Zip Code	Has a building permit been obtained for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required

II. Applicant and Contact Information

Indicate Who the Applicant Is. If homeowner, skip to Section III.		Contractor		Homeowner	
Contractor Company Name		Phone Number		Email Address (Required)	
Contractor Company Address		City		State	Zip Code
License Number		Expiration Date		Federal Employer ID (or reason for exemption)	
Workers Compensation Insurance Carrier (or reason for exemption)		Unemployment Agency Number (or reason for exemption)			

III. Type of Work

<input type="checkbox"/> Single Family	<input type="checkbox"/> New	<input type="checkbox"/> Remodel	<input type="checkbox"/> Special Inspection
<input type="checkbox"/> Other	<input type="checkbox"/> Addition	<input type="checkbox"/> Interior Finish	<input type="checkbox"/> Service Only

IV. Description of Work

V. Homeowner Affidavit

I hereby certify the electrical work described in 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 City of Plymouth electrical inspector. I will cooperate with the electrical inspector and assume the responsibility to arrange for required inspections.
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VI. Applicant Signature

Section 23a of the State 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 to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil fines.	
Signature of Electrical Contractor or Homeowner (Homeowner signature indicates compliance with Section V Homeowner Affidavit)	Date

VII. Fee Chart – Enter the number of items being installed, multiply by the unit price for the total fee

	FEE	QTY	TOTAL
<u>SERVICE/SUB PANELS</u>			
Service, up to 200 amps: Amps	\$60.00		
Service, 201 to 599 amps: Amps	\$110.00		
Service, over 600 amps: Amps	\$160.00		
Temporary service	\$60.00		
Sub panels, per panel	\$20.00		
<u>CIRCUITS</u>			
Air conditioner circuit	\$20.00		
Dishwasher circuit	\$15.00		
Furnace circuit	\$20.00		
Garbage disposal circuit	\$15.00		
Laundry circuit	\$15.00		
Microwave oven circuit	\$15.00		
Range circuit	\$15.00		
Range hood circuit	\$15.00		
Sign circuit	\$60.00		
Swimming pool/hot tub circuit	\$60.00		
Circuit, other	\$15.00		
<u>FIXTURES</u>			
Fixtures (lights and plugs), per 25	\$20.00		
Pole light in parking lot	\$15.00		
<u>EQUIPMENT</u>			
Car chargers	\$60.00		
Power outlets (range, dryer, etc.)	\$15.00		
Solar panels, per panel	\$20.00		
Effective July 7, 2023			

	FEE	QTY	TOTAL
<u>LOW VOLTAGE</u>			
Data/communication, per device Min. \$25	\$6.00		
<u>MOTORS/GENERATORS</u> *Generators require a scaled/dimensioned site plan			
Units up to 20 HP/KW	\$30.00		
Units 21 thru 40 HP/KW	\$40.00		
Units 41 thru 60 HP/KW	\$50.00		
Units more than 61 HP/KW	\$55.00		
<u>FEEDERS</u>			
Feeders, bus ducts, under floor ducts, per 50 feet	\$20.00		
Conduit only	\$60.00		
<u>FIRE ALARMS- MUST SUBMIT 4-sets of PLANS</u>			
Fire alarm system, per device Min. \$60	\$5.00		
Fire alarm review fee Min. \$200, Plus \$75/addl. hr.	\$200.00		
Smoke detector, per system	\$25.00		
<u>INSPECTIONS</u>			
Additional & Re-inspection	\$80.00		
<u>PERMIT FEE SUB-TOTAL</u>			
MINIMUM PERMIT FEE IS \$50			
<u>LICENSE REGISTRATION</u>			
Electrical contractor-per cycle	\$20.00		
Administrative fee	\$20.00	1	\$20.00
<u>TOTAL FEE</u>			
Make checks payable to "City of Plymouth"			

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