



CITY OF WESTLAND
DEPARTMENT OF BUILDING AND PLANNING

Permit No. _____

36300 Warren, Westland, Michigan 48185 (734) 467-3210 FAX 422-1218

CITY OF WESTLAND
An All **AMERICAN** City
www.cityofwestland.com

APPLICATION FOR COMMERCIAL MECHANICAL PERMIT
"MUST BE FILLED OUT IN INK"

William R. Wild - Mayor

Date: _____ Location: _____

Company Name: _____ Phone: _____

Property Owner: _____ Phone: _____

Applicant's Signature _____

COMMERCIAL NEW CONSTRUCTION ADDITION ALTERATION

HEATING

_____ @ \$55.00 \$ _____	Gas burners / not exceeding 500,000 BTU's
_____ @ \$60.00 \$ _____	Gas burners / exceeding 500,000 BTU's
_____ @ \$40.00 \$ _____	Gas piping and pressure test
_____ @ \$35.00 \$ _____	Ductwork alterations
_____ @ \$50.00 \$ _____	Ductwork – New system (each)
_____ @ \$30.00 \$ _____	Air handlers or exhaust fan (each)
_____ @ \$50.00 \$ _____	Hydronic Piping – each system
_____ @ \$100.00\$ _____	Kitchen Hoods, spray booths (new inc. duct & exhaust fan) each
_____ @ \$50.00 \$ _____	Kitchen hood, spray booth only (each)
	Amount \$ _____

AIR CONDITIONING/REFRIGERATION

_____ @ \$40.00 \$ _____	Less than 1 ton each
_____ @ \$45.00 \$ _____	1 ton to 5 ton each
_____ @ \$55.00 \$ _____	6 ton to 50 ton each
_____ @ \$80.00 \$ _____	Over 50 ton each
_____ @ \$30.00 \$ _____	Evaporator coils, hot water, chilled water (each)
	Amount \$ _____

FIRE SUPPRESSION

_____ @ \$50.00 \$ _____	Chemical system
_____ @ \$50.00 \$ _____	Puff Test
_____ @ \$50.00 \$ _____	Water sprinkler distribution piping
_____ @ \$ 2.00 \$ _____	Water sprinkler heads
_____ @ \$100.00\$ _____	Hydrostatic test
_____ @ \$20.00 \$ _____	Duct smoke detectors (not installed with new system) upto 5
_____ @ \$ 5.00 \$ _____	each additional 5 smoke detectors
_____ @ \$ 8.00 \$ _____	Fire/smoke dampers(first 5) per each unit
_____ @ \$ 2.00 \$ _____	Fire/smoke dampers per each additional
	Amount \$ _____

Plan review for fire suppression is per fire department charge and additional to these fees

MINIMUM FEE \$50.00
Administration fee \$ 40.00 _____

TOTAL \$ _____

Permit holder is responsible for scheduling all required inspections, access to all parts of building that work has been performed. **NO WORK MAY BE COVERED UNTIL ALL INSPECTIONS BY ALL TRADES HAVE BEEN COMPLETED!**

I. LOCATION OF BUILDING			
ADDRESS			
CITY	COUNTY	ZIP CODE	
BETWEEN		AND	
II. IDENTIFICATION			
A. OWNER OR LESSEE			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
B. ARCHITECT OR ENGINEER			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NO.		EXPIRATION DATE	
C. CONTRACTOR			
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
LICENSE NO.		EXPIRATION DATE	
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION			
WORKERS COMP. INSURANCE CARRIER OR REASON FOR EXEMPTION			
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION			

"SECTION 23a OF THE STATE CONSTRUCTION CODES ACT OF 1972, ACT NO. 230 OF 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 PERFORM WORK ON A RESIDENTIAL BUILDING OR A RESIDENTIAL STRUCTURE, VIOLATORS OF SECTION 23a ARE SUBJECTED TO CIVIL FINES."

APPLICANT SIGNATURE: _____

Form Must Be Signed By Property Owner or Contractor