



Public Infrastructure Permit Application

Submit Applications to City Hall

Street Address: 114 North Kidd Street Ionia, MI 48846

Mailing Address: P.O. Box 496 Ionia, MI 48846

Ph: (616) 527-4170 Website: www.cityofionia.org

Date of Application: _____

Permit Fee: See Below

Property Address: _____ Parcel Number: _____

Applicant Information

Owner's Name: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Contractor: _____ License Number: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Applicant's Name: _____ Interest in Property: _____

Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

Project Information

Please check all that apply to the proposed project:

- New Construction Existing Construction
 Commercial Residential Other: _____

City Utility Tap-In

Size of Tap-In: 1" Tap 2" Tap Other: _____

- Water Tap (Select Meter Size for Fee) Sewer Tap (Select Meter Size for Fee)

Water Meter Size	Effective 7/1/24
<input type="checkbox"/> 5/8 inch	\$ 2,600
<input type="checkbox"/> 3/4 inch	\$ 3,900
<input type="checkbox"/> 1 inch	\$ 6,500
<input type="checkbox"/> 1 ½ inch	\$ 13,000
<input type="checkbox"/> 2 inch	\$ 20,800
<input type="checkbox"/> 3 inch	\$ 39,000
<input type="checkbox"/> 4 inch	\$ 65,000
<input type="checkbox"/> 6 inch	\$130,000
<input type="checkbox"/> 8 inch	\$208,000
<input type="checkbox"/> 10 inch	\$299,000

Water Meter Size	Effective 7/1/24
<input type="checkbox"/> 5/8 inch	\$ 2,400
<input type="checkbox"/> 3/4 inch	\$ 3,600
<input type="checkbox"/> 1 inch	\$ 6,000
<input type="checkbox"/> 1 ½ inch	\$ 12,000
<input type="checkbox"/> 2 inch	\$ 19,200
<input type="checkbox"/> 3 inch	\$ 36,000
<input type="checkbox"/> 4 inch	\$ 60,000
<input type="checkbox"/> 6 inch	\$120,000
<input type="checkbox"/> 8 inch	\$192,000
<input type="checkbox"/> 10 inch	\$276,000

Other Services

Fee

- | | |
|---|--------------------------------|
| <input type="checkbox"/> Berlin Township Sewer Inspection Fee | \$40 |
| <input type="checkbox"/> Curb Cut (New or Restoration) | No Fee |
| <input type="checkbox"/> Drainage Permit | \$50 |
| <input type="checkbox"/> Drive Approach (New or Restoration) | \$25 Plus Insurance Coverage |
| <input type="checkbox"/> Sidewalk (New or Restoration) | Fee Waived with Permit |
| <input type="checkbox"/> Storm Sewer Tap-In Permit | \$500 Up to 11,000 Sq. Ft. Lot |
| <input type="checkbox"/> Other: _____ | |

Please provide any other details about the project:

Insurance Requirements

- | | |
|---|-------------|
| - On account of injury to, or death of, any person in any one accident | \$1,000,000 |
| - On account of any one accident resulting in injury to, or death of more than one person | \$1,000,000 |
| - On accident of damage to property in any one accident | \$1,000,000 |

Inspection by the City

_____ (Initial) I acknowledge that all tap-ins and public utility connections require an inspection by the City's Department of Public Works. Contact (616) 523-0170 when you are ready for an inspection. A zoning permit will also be required for the project.

All connections to City utilities must be inspected by authorized City personnel.

Signature

By signing below, I _____ (print name), agree on behalf of the organization I represent that if this application is approved, the project will meet all legal requirements. I understand that I will be responsible to the City of Ionia for any damages to the street, street structures, or structures of any private company within the right-of-way of the streets. I further agree to pay all damages, fines and penalties for which I am liable and shall hold the City of Ionia harmless from all suits, claims, damages and proceedings of any kind due to my operations within the streets.

Applicant's Signature: _____ Date: _____

OFFICE USE ONLY

Fees Paid Date: _____ Receipt #: _____ Check #: _____

Insurance Certificate Information

Drawing Attached

Water Availability Yes No

Sewer Availability Yes No

Existing Water Tap Yes No

Existing Sewer Tap Yes No

Water Connection Completion Date: _____ Employee Initials: _____

Sewer Connection Completion Date: _____ Employee Initials: _____

Comments: _____

Copies To: _____

Signature: _____ Date: _____