

**Application Permit for Nuclear to Repair, Install and/or Replacement**

**168/169**

Michigan Department of Licensing and Regulatory Affairs

Bureau of Construction Codes

P.O. Box 30255, Lansing, MI 48909

517-241-9313

www.michigan.gov/bcc

**Nuclear Installation Permit Fee:** \$1,380.00 (nonrefundable) (168)

**Nuclear Repair Permit Fee:** \$ 400.00 (nonrefundable) (169)

(As required by Rule 38)

OFFICE USE ONLY

LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

FEE PAID
AMOUNT \$
TRANSMITTAL NUMBER

Authority: **2016 PA 407 and Michigan Boiler Rules**

**Rule 33.** A person shall not install, reinstall, alter or repair a boiler without holding a proper license and first securing a permit from the boiler division of the department.

**Rule 35.** Permits shall be issued only to persons licensed as required by the act and these rules. Work shall be performed by or under the supervision of a licensed person.

**Important:** A new or reinstalled boiler shall not be operated until an inspection certificate is issued by the Boiler Division, State of Michigan. The inspection certificate will not be issued until electrical, mechanical, and plumbing permits have had a final inspection approval.

**Instructions:**

- Submit original and 2 copies of this application.
- Enclose a check made payable to the **State of Michigan**.
- Mail completed **original application with 2 copies** and payment to the address listed above.

**Type of Permit**

<input type="checkbox"/> Repair Vessel	<input type="checkbox"/> Replace Piping	<input type="checkbox"/> Install Piping
<input type="checkbox"/> Replace Vessel	<input type="checkbox"/> Install Vessel	<input type="checkbox"/> Replace Components

**Licensee Information**

NAME		APPLICATION DATE	
ADDRESS	LICENSE NUMBER	CLASS OF LICENSE	E-MAIL ADDRESS
CITY	STATE	ZIP CODE	TELEPHONE NUMBER (Include Area Code)      FAX NUMBER (Include Area Code)

**Owner / User Information**

NAME			BOILER LOCATION (If Different)		
ADDRESS			COUNTY		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

**NOTE: REPAIR PLAN MUST BE REVIEWED BY JURISDICTIONAL AUTHORITY BEFORE PERMIT APPROVAL**

Repair Plan Submitted? (Reference Section XI ASME Code) <input type="checkbox"/> Yes <input type="checkbox"/> No	Reviewed By Your Authorized Inspector? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME OF LICENSED INSPECTOR WHO REVIEWED AND CONCURRED WITH THE REPAIR PROGRAM	NAME OF LICENSED INSPECTOR'S EMPLOYER
REPAIR PLAN NUMBER	MICHIGAN SERIAL NUMBER
DESCRIPTION OF PROPOSED WORK	

**Complete Section Below Where Applicable**

Specifications			
WELDING PROCEDURE		NUMBER	P-GROUP MATERIALS
ELECTRODE CLASS		PROCESS USED	PROCESS ON FILE
MATERIALS		PLATE SA	PIPE OR TUBING SA
STAYS OR RIVETS		OTHER SA	MILL TEST DATA
STRESS RELIEF		TYPE	TEMP-THERMAL
RECORD ATTACHED	NON-DESTRUCTIVE TEST	X-RAY	RESULT
HYDROSTATIC TEST	PRESSURE APPLIED	RESULT	
OTHER TEST		RESULT	
REMARKS			

**Certification and Signature**

I hereby certify the above described repairs or alterations were performed in conformity with all of the requirements of the Michigan Boiler Laws and Rules by authority of 1965 PA 290. Falsification of any statement is cause for rejection of application and may result in suspension of applicant's license.	
SIGNATURE OF APPLICANT	DATE