



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 55 Morning Street Portland Unit 1-2  
 CBL:

## PROPERTY OWNER(S) NAME

NAME: Laura Talbot  
 Applicant Name: DANA COLLINS / Richard WALTZ Plumbing  
 Mailing Address of Owner/Applicant (if Different): 179 Presumpscot Street Portland ME 04103  
 Owner/Applicant Statement

I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.

[Signature] 4/11/16  
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2016-00851  
 Date Permit Issued 4/11/16 Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]

Local Plumbing Inspector Signature [Signature] L.P.I. # 360

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.

### Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

\_\_\_\_\_ Date Approved (Rough-in)  
 \_\_\_\_\_ LPI Signature \_\_\_\_\_ Date Approved (Final)

## PERMIT INFORMATION

This Application is for  
 1  NEW PLUMBING  
 2  RELOCATED PLUMBING

### Type of Structure to be Served

- 1  SINGLE FAMILY RESIDENCE
- 2  MODULAR OR MOBILE HOME
- 3  MULTIPLE FAMILY DWELLING
- 4  OTHER-SPECIFY \_\_\_\_\_

### Plumbing to be Installed by:

NAME: DANA COLLINS  
 1  MASTER PLUMBER  
 2  OIL BURNERMAN  
 3  MFG'D HOUSING DEALER / MECHANIC  
 4  PUBLIC UTILITY EMPLOYEE  
 5  PROPERTY OWNER  
M590009320  
 LICENSE # | | | | | | | | | |

**RECEIVED**  
 APR 11 2016  
 Dept. of Building Inspections  
 City of Portland Maine

**Please call 874-8703 with your permit # to schedule inspections!**

Hook-Up & Piping Relocation Maximum of 1 Hook-Up:	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.  <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system  <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2		<input type="checkbox"/> Fixtures (Subtotal) Column 1	
			<u>14</u> TOTAL FIXTURES	
<input type="checkbox"/> TRANSFER FEE (\$10.00)	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee	
			<input type="checkbox"/> Hook-Up & Relocation Fee	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>			<u>50</u> PERMIT FEE (TOTAL)	