



PLUMBING PERMIT APPLICATION

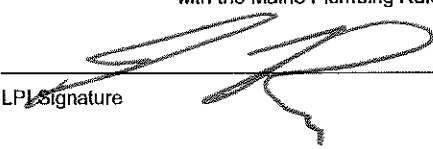
PROPERTY ADDRESS	
Street:	32 MORNING STREET
CBL:	
PROPERTY OWNER(S) NAME	
OWNER NAME:	JULIA HALEY
Applicant Name:	ATLANTIC HEATING CO.
Mailing Address of Owner/Applicant (if Different)	474 RIVERSIDE INDUSTRIAL PARKWAY
E Mail:	JEFFB@ATLANTICHEATIN
Owner/Applicant Statement	
I certify that the information 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.	
JEFF BELLINO	11/16/16
Signature of Owner/Applicant	Date

Town/City	PORTLAND	Permit #	2016-08113
Date Permit Issued	11/16/16	Fee: \$	50
		Double Fee Charged	<input type="checkbox"/>
Local Plumbing Inspector Signature		L.P.I. # 1081	

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.


11/16/16
 LPI Signature Date Approved (Final)

PERMIT INFORMATION

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ Please call 874-8703 with your permit # to schedule inspections!	Plumbing to be Installed by: NAME: THOMAS FLETCHER 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # MS90014166																																																								
Hook-Up & Piping Relocation Maximum of 1 Hook-Up <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.	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td></tr> <tr> <td colspan="2">Fixtures (Subtotal) Column 2</td> </tr> </tbody> </table>	Number	Column 2 Type of Fixture	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	Fixtures (Subtotal) Column 2		<table border="1"> <thead> <tr> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/></td><td>Sink</td></tr> <tr><td><input type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td>1</td><td>Water Heater</td></tr> <tr> <td colspan="2">Fixtures (Subtotal) Column 1</td> </tr> <tr> <td colspan="2">TOTAL FIXTURES</td> </tr> <tr> <td colspan="2"> Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> TRANSFER FEE [\$10.00] </td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Hook-Up & Relocation Fee </td> </tr> </tbody> </table>	Number	Column 1 Type of Fixture	<input type="checkbox"/>	Bathtub (and Shower)	<input type="checkbox"/>	Shower (separate)	<input type="checkbox"/>	Sink	<input type="checkbox"/>	Wash Basin	<input type="checkbox"/>	Water Closet (Toilet)	<input type="checkbox"/>	Clothes Washer	<input type="checkbox"/>	Dish Washer	<input type="checkbox"/>	Garbage Disposal	<input type="checkbox"/>	Laundry Tub	1	Water Heater	Fixtures (Subtotal) Column 1		TOTAL FIXTURES		Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<input type="checkbox"/> TRANSFER FEE [\$10.00]		<input type="checkbox"/> Hook-Up & Relocation Fee	
Number	Column 2 Type of Fixture																																																									
<input type="checkbox"/>	Hosebib / Sillcock																																																									
<input type="checkbox"/>	Floor Drain																																																									
<input type="checkbox"/>	Urinal																																																									
<input type="checkbox"/>	Drinking Fountain																																																									
<input type="checkbox"/>	Indirect Waste																																																									
<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.																																																									
<input type="checkbox"/>	Grease / Oil Separator																																																									
<input type="checkbox"/>	Roof Drain																																																									
<input type="checkbox"/>	Bidet																																																									
<input type="checkbox"/>	Other: _____																																																									
Fixtures (Subtotal) Column 2																																																										
Number	Column 1 Type of Fixture																																																									
<input type="checkbox"/>	Bathtub (and Shower)																																																									
<input type="checkbox"/>	Shower (separate)																																																									
<input type="checkbox"/>	Sink																																																									
<input type="checkbox"/>	Wash Basin																																																									
<input type="checkbox"/>	Water Closet (Toilet)																																																									
<input type="checkbox"/>	Clothes Washer																																																									
<input type="checkbox"/>	Dish Washer																																																									
<input type="checkbox"/>	Garbage Disposal																																																									
<input type="checkbox"/>	Laundry Tub																																																									
1	Water Heater																																																									
Fixtures (Subtotal) Column 1																																																										
TOTAL FIXTURES																																																										
Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture																																																										
<input type="checkbox"/> TRANSFER FEE [\$10.00]																																																										
<input type="checkbox"/> Hook-Up & Relocation Fee																																																										
OR		TOTAL FIXTURES 1																																																								
		PERMIT FEE (TOTAL) 50																																																								
Please call 874-8703 with your permit # to schedule inspections!																																																										