



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Street: 200 Anderson Street		Town/City PORTLAND	Permit # _____
CBL: 010 E001001		Date Permit Issued ____ / ____ / ____		Fee: \$ _____	Double Fee Charged []
PROPERTY OWNER(S) NAME		NAME: Joseph Wojcik		L.P.I. # 360	
Applicant Name: George Madden		Mailing Address of Owner/Applicant (if Different) 205 Burnham Rd Gorham ME		Local Plumbing Inspector Signature _____	
Owner/Applicant Statement		<p>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.</p> <p>George Madden 02/12/2014</p> <p>Signature of Owner/Applicant Date</p>			
		<p>Caution: Inspection Required</p> <p>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.</p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p>			
		LPI Signature _____		Date Approved (Final) _____	
				Date Approved (Rough-in) _____	

PERMIT INFORMATION

<p>This Application is for</p> <p>1 <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2 <input type="checkbox"/> RELOCATED PLUMBING</p>	<p style="text-align: center;">Type of Structure to be Served</p> <p>1 <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2 <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4 <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Commercial</u></p> <p style="text-align: center; background-color: #cccccc; padding: 5px;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p style="text-align: center;">Plumbing to be Installed by:</p> <p>NAME: <u>George Madden</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>MS90014195</u></p>
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	Column 2	Column 1
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Number
Type of Fixture	Type of Fixture	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"/> 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 checked="" type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
OR	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	60 TOTAL FIXTURES
		<input type="checkbox"/> Fixture Fee
		<input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!	60.00	PERMIT FEE (TOTAL)