



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	155 Anderson St.
CBL:	0106006
PROPERTY OWNER(S) NAME	
NAME:	Portland Housing Authority
Applicant Name:	Portland Housing Authority
Mailing Address of Owner/Applicant (if Different)	14 Baxter Blvd Portland, ME 04101
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 of Owner/Applicant	Date

Town/City	PORTLAND	Permit #	_____
Date Permit Issued	___/___/___	Fee: \$	_____
		Double Fee Charged []	
		L.P.I. #	360
Local Plumbing Inspector Signature			

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 <input type="checkbox"/> NEW PLUMBING 2 <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1 <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2 <input type="checkbox"/> MODULAR OR MOBILE HOME 3 <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4 <input type="checkbox"/> OTHER-SPECIFY _____	Plumbing to be Installed by: NAME: <u>Gibral for Construction</u> 1 <input type="checkbox"/> MASTER PLUMBER 2 <input type="checkbox"/> OIL BURNERMAN 3 <input checked="" type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5 <input type="checkbox"/> PROPERTY OWNER LICENSE #																																																								
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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>___</td><td>Hosebib / Silcock</td></tr> <tr><td>___</td><td>Floor Drain</td></tr> <tr><td>___</td><td>Urinal</td></tr> <tr><td>___</td><td>Drinking Fountain</td></tr> <tr><td>___</td><td>Indirect Waste</td></tr> <tr><td>___</td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td>___</td><td>Grease / Oil Separator</td></tr> <tr><td>___</td><td>Roof Drain</td></tr> <tr><td>___</td><td>Bidet</td></tr> <tr><td>___</td><td>Other: _____</td></tr> <tr><td>___</td><td>Fixtures (Subtotal) Column 2</td></tr> </tbody> </table>	Number	Column 2 Type of Fixture	___	Hosebib / Silcock	___	Floor Drain	___	Urinal	___	Drinking Fountain	___	Indirect Waste	___	Water Treatment Softener, Filter, Etc.	___	Grease / Oil Separator	___	Roof Drain	___	Bidet	___	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>___</td><td>Bathtub (and Shower)</td></tr> <tr><td>___</td><td>Shower (separate)</td></tr> <tr><td>___</td><td>Sink</td></tr> <tr><td>___</td><td>Wash Basin</td></tr> <tr><td>___</td><td>Water Closet (Toilet)</td></tr> <tr><td>___</td><td>Clothes Washer</td></tr> <tr><td>___</td><td>Dish Washer</td></tr> <tr><td>___</td><td>Garbage Disposal</td></tr> <tr><td>___</td><td>Laundry Tub</td></tr> <tr><td>___</td><td>Water Heater</td></tr> <tr><td>___</td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td>___</td><td>TOTAL FIXTURES</td></tr> <tr><td>160</td><td>Fixture Fee</td></tr> <tr><td>10</td><td>Transfer Fee</td></tr> <tr><td>___</td><td>Hook-Up & Relocation Fee</td></tr> </tbody> </table>	Number	Column 1 Type of Fixture	___	Bathtub (and Shower)	___	Shower (separate)	___	Sink	___	Wash Basin	___	Water Closet (Toilet)	___	Clothes Washer	___	Dish Washer	___	Garbage Disposal	___	Laundry Tub	___	Water Heater	___	Fixtures (Subtotal) Column 1	___	TOTAL FIXTURES	160	Fixture Fee	10	Transfer Fee	___	Hook-Up & Relocation Fee
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OR	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	\$70.00 PERMIT FEE (TOTAL)																																																								
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CBL	010 G006			toilets	
	Building	1	155 Anderson S	6	6