



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 79 walnut St

CBL: Munjoy Heights Building D

## PROPERTY OWNER(S) NAME

NAME: Red Furn Property

Applicant Name: Bill Pinard & Son Plumbing

Mailing Address of Owner/Applicant (if Different) P.O Box293 Sabattus

## 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.

Mark Pinard

7/9/14

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 ☒ 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 \_\_\_\_\_

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

### Plumbing to be Installed by:

NAME: \_\_\_\_\_

- 1 ☒ MASTER PLUMBER  
2 ☐ OIL BURNERMAN  
3 ☐ MFG'D HOUSING DEALER / MECHANIC  
4 ☐ PUBLIC UTILITY EMPLOYEE  
5 ☐ PROPERTY OWNER

LICENSE # 13350 \_\_\_\_\_

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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.	4 <input type="checkbox"/> Hosebib / Sillcock	4 <input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	4 <input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	4 <input type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	16 <input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	12 <input type="checkbox"/> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	4 <input type="checkbox"/> Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	4 <input type="checkbox"/> Dish Washer
	<input type="checkbox"/> Roof Drain	4 <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: _____	4 <input type="checkbox"/> Water Heater
	4 <input type="checkbox"/> Fixtures (Subtotal) Column 2	56 <input type="checkbox"/> Fixtures (Subtotal) Column 1
OR		60 <input type="checkbox"/> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	60 <input type="checkbox"/> Fixture Fee Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		610.00 <input type="checkbox"/> PERMIT FEE (TOTAL)