



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 47 Howard St

CBL: 014 Hood

PROPERTY OWNER(S) NAME

OWNER NAME: Kate Hakleroad

Applicant Name: Shingoro Sargent

Mailing Address of Owner/Applicant (if Different) 243 County R Gorham

E Mail: shm@integratedsystemsmaine.com

Town/City PORTLAND Permit # 20150193

Date Permit Issued 8/6/15 Fee: \$ NO 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.

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 [Signature] Date 8/6/15

Caution: Inspection Required

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

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 Shingoro Sargent
1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER / MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER
LICENSE # MS1900V143810

HOOK-UP & Piping Relocation Maximum of 1 Hook-Up
 HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.
 HOOK-UP: to an existing subsurface wastewater disposal system
 PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.
OR
 TRANSFER FEE [\$10.00]

Number	Column 2 Type of Fixture
<input checked="" type="checkbox"/>	2 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: _____
<input checked="" type="checkbox"/>	2 Fixtures (Subtotal) Column 2
Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	

Number	Column 1 Type of Fixture
<input checked="" type="checkbox"/>	1 Bathtub (and Shower)
<input checked="" type="checkbox"/>	2 Shower (separate)
<input checked="" type="checkbox"/>	5 Sink
<input type="checkbox"/>	Wash Basin
<input checked="" type="checkbox"/>	3 Water Closet (Toilet)
<input checked="" type="checkbox"/>	1 Clothes Washer
<input type="checkbox"/>	Dish Washer
<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/>	Laundry Tub
<input checked="" type="checkbox"/>	1 Water Heater
<input checked="" type="checkbox"/>	14 Fixtures (Subtotal) Column 1
<input checked="" type="checkbox"/>	16 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! PERMIT FEE (TOTAL)