



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 29 Atlantic St Portland

CBL:

PROPERTY OWNER(S) NAME

NAME: Susan Grisanti
Applicant Name: Jim Gadbout Plmb & Htg
Mailing Address of Owner/Applicant (if Different): PO Box 365 Biddeford Me 04005

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: 10/25/13

Town/City PORTLAND

Permit # _____

Date Permit Issued 11/1 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 # 05993

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]

Column 2

Number Type of Fixture

- | | |
|----------|--|
| <u>2</u> | Hosebib / Sillcock |
| <u>1</u> | Floor Drain |
| <u>1</u> | Urinal |
| <u>1</u> | Drinking Fountain |
| <u>1</u> | Indirect Waste |
| <u>1</u> | Water Treatment Softener, Filter, Etc. |
| <u>1</u> | Grease / Oil Separator |
| <u>1</u> | Roof Drain |
| <u>1</u> | Bidet |
| <u>1</u> | Other: _____ |
| <u>2</u> | Fixtures (Subtotal) Column 2 |

Fees by fixture:
First 4 fixtures = \$40 Over 4 = \$10/fixture
+ \$10 Surcharge

Column 1

Number Type of Fixture

- | | |
|----------|------------------------------|
| <u>2</u> | Bathtub (and Shower) |
| <u>3</u> | Shower (separate) |
| <u>2</u> | Sink |
| <u>4</u> | Wash Basin |
| <u>4</u> | Water Closet (Toilet) |
| <u>1</u> | Clothes Washer |
| <u>2</u> | Dish Washer |
| <u>1</u> | Garbage Disposal |
| <u>1</u> | Laundry Tub |
| <u>1</u> | Water Heater |
| <u>2</u> | Fixtures (Subtotal) Column 1 |

TOTAL FIXTURES

Fixture Fee
Transfer Fee

Hook-Up & Relocation Fee

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

PERMIT FEE (TOTAL)