



# PLUMBING PERMIT APPLICATION

<b>PROPERTY ADDRESS</b>		Town/City <b>PORTLAND</b> Permit # _____	
Street: <b>290 Congress Street</b>		Date Permit Issued ____ / ____ / ____      Fee: \$ _____ Double Fee Charged [ ]	
CBL: _____		L.P.I. # <b>360</b>	
<b>PROPERTY OWNER(S) NAME</b>		Local Plumbing Inspector Signature _____	
NAME: _____		<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>	
Applicant Name: <b>Johnson and Jordan Inc.</b>		<b>Caution: Inspection Required</b>	
Mailing Address of Owner/Applicant (if Different) <b>18 Mussey Road Scarborough</b>		I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.	
<b>Owner/Applicant Statement</b>		Date Approved (Rough-in) _____	
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.		Date Approved (Final) _____	
Signature of Owner/Applicant _____ Date <b>7/14/14</b>		LPI Signature _____ Date Approved (Final) _____	

PERMIT INFORMATION			
<b>This Application is for</b> 1 <input checked="" type="checkbox"/> NEW PLUMBING 2 <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure to be Served</b> 1 <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2 <input type="checkbox"/> MODULAR OR MOBILE HOME 3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4 <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Co-op</u>	<b>Plumbing to be Installed by:</b> <b>NAME:</b> <u>Christopher Jordan.</u> 1 <input checked="" type="checkbox"/> MASTER PLUMBER 2 <input type="checkbox"/> OIL BURNERMAN 3 <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5 <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>02460</u>	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>			
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.	<input type="checkbox"/> Hosebib / Sillcock <input type="checkbox"/> <b>0</b>   <b>4</b>   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"/> Bathtub (and Shower) <input type="checkbox"/> Shower (separate) <input type="checkbox"/> <b>0</b>   <b>7</b>   Sink <input type="checkbox"/> Wash Basin <input type="checkbox"/> Water Closet (Toilet) <input type="checkbox"/> Clothes Washer	
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Grease / Oil Separator <input type="checkbox"/> Roof Drain <input type="checkbox"/> Bidet	<input type="checkbox"/> <b>0</b>   <b>1</b>   Dish Washer <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Laundry Tub	
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> <b>0</b>   <b>4</b>   Other: indirect waste. <input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> <b>0</b>   <b>1</b>   Water Heater <input type="checkbox"/> Fixtures (Subtotal) Column 1	
<b>OR</b>		<b>TOTAL FIXTURES</b>	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee	
		<input type="checkbox"/> Hook-Up & Relocation Fee	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>PERMIT FEE (TOTAL)</b>	