

PLUMBING PERMIT APPLICATION

PROPERTY ADDR	RESS						
Street:		Town/City PORTLAND	Permit #				
46 MARKET ST.		Date Permit Issued/_/	Fee: \$Double Fee Charged []				
CBL:			200				
PROPERTY OWNER(S	S) NAME	L.P.I. # 360 Local Plumbing Inspector Signature					
NAME: MARKET MILK TA	athers llc						
Applicant Name: Mailing Address of 7 STEPHENSON ST. Owner/Applicant (if Different) Owner/Applicant Statement Owner/Applicant Statement 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.		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.					
				Signature of Owner/Applicant Date		Date Approved (Rough-in)	
						LPI Signature	Date Approved (Final)
CHARLES CONTRACTOR		NFORMATION					
This Application is for	Type of Structure to be Served		Plumbing to be Installed by:				
1. NEW PLUMBING			NAME: JEREMY MARSTON				
2. RELOCATED PLUMBING	1. SINGLE FAMILY RESIDENCE		NAME: SCEEMED 1: 145184				
Z. RELOCATED PLUMBING	2. MODULAR OR MOBILE HOME		1. MASTER PLUMBER				
	3. 12 MULTIPLE FAMILY DWELLING		2. OIL BURNERMAN				
	4. OTHER-SPECIFY		3. MFG'D HOUSING DEALER / MECHANIC				
			4. PUBLIC UTILITY EMPLOYEE				
		874-8703 with your	5. PROPERTY OWNER				
	permit # to schedule inspections!		LICENSE # MS 19101013274				
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Col Number	umn 2 Type of Fixture	Column 1 Number Type of Fixture				
HOOK-UP: to public sewer by	Hosebib /		Bathtub (and Shower)				
those cases where the connection	Floor Drain		Shower (separate)				
is not regulated and inspected by	Urinal						
the local sanitary district.	Drinking Fountain		OS Wash Basin				
	Indirect W		O S Water Closet (Toilet)				
HOOK-UP: to an existing subsurface wastewater disposal system	Water Treatment Softener, Filter,Etc.		Clothes Washer				
		Oil Separator	Dish Washer				
	Roof Drain)	Garbage Disposal				
PIPING RELOCATION: of sanitary	_ _ Bidet		Laundry Tub				
lines, drains, and piping without new fixtures.	_ _ Other:	11.1001	OS Water Heater				
	_ Fixtures (S	ubtotal) Column 2					
OR	Face by 6:4:		TOTAL FIXTURES				
Fees by fixture: TRANSFER FEE [\$10.00] First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge			Fixture Fee Transfer Fee				
	. ψ		Hook-Up & Relocation Fee				
Please call 874-8703 with your permit # to schedule inspections!			360 PERMIT FEE (TOTAL)				