



# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street: 79 Portland Street	
CBL: 033 A007001	
PROPERTY OWNER(S) NAME	
OWNER NAME: Seventy Nine Portland Street LLC	
Applicant Name: George Madden	
Mailing Address of Owner/Applicant (if Different) 205 Burnham Road Gorham, ME	
E Mail: maddenplumbing@maine.rr.com	
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	Date: 8/27/14

Town/City: PORTLAND	Permit # _____
Date Permit Issued: ___/___/___	Fee: \$ _____ Double Fee Charged <input type="checkbox"/>
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.

\_\_\_\_\_  
LPI Signature

\_\_\_\_\_  
Date Approved (Final)

## PERMIT INFORMATION

<p><b>This Application is for</b></p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p>	<p><b>Type of Structure to be Served</b></p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Commercial</u></p> <p style="text-align: center;"><b>Please call 874-8703 with your permit # to schedule inspections!</b></p>	<p><b>Plumbing to be Installed by:</b></p> <p>NAME: George Madden</p> <p>E Mail: maddenplumbing@maine.rr.com</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>MS90014195</u></p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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.		Hosebib / Sillcock	1	Bathtub (and Shower)
	2	Floor Drain		Shower (separate)
		Urinal	4	Sink
		Drinking Fountain	7	Wash Basin
		Indirect Waste	4	Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		Water Treatment Softener, Filter, Etc.	1	Clothes Washer
	1	Grease / Oil Separator	1	Dish Washer
		Roof Drain		Garbage Disposal
<input checked="" type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Bidet		Laundry Tub
		Other: _____	1	Water Heater
		<b>Fixtures (Subtotal) Column 2</b>	<b>319</b>	<b>Fixtures (Subtotal) Column 1</b>
<b>OR</b>			<b>22</b>	<b>TOTAL FIXTURES</b>
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture First 4 fixtures = \$40 Over = \$10/per fixture		220	Fixture Fee Transfer Fee
			10	Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>			230	<b>PERMIT FEE (TOTAL)</b>