

44834

PLUMBING APPLICATION

117181

PROPERTY ADDRESS

City, Town, or Plantation: Portland
 Street or Road: #6 Stratton Pl.
 Subdivision, Lot #: _____

ED <<

Town/City: Portland Permit # 2012 40986
 Date Permit Issued: 2/1/12 Fee: \$ 600 Double Fee Charged | |
 L.P.I. # 360

PROPERTY OWNERS NAME

Name (last, first, MI): McDaniel Kelly-Donna
 Owner Applicant
 Mailing Address of Owner/Applicant: 6-Stratton Pl.
 Daytime Tel. #: 207-752-3964

Local Plumbing Inspector Signature: _____
 Date Approved (Rough-In): _____
 Date Approved (Final): _____

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 Internal Plumbing Rules.

OWNER OR APPLICANT STATEMENT

I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

CAUTION: INSPECTION REQUIRED
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

Signature of Owner or Applicant: _____ Date: _____

Local Plumbing Inspector Signature: _____ Date Approved (Final): _____

PERMIT INFORMATION

This Application Is For 1. <input checked="" type="checkbox"/> NEW PLUMBING INSTALLATION 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____	Plumbing To Be Installed By 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC 3. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 4. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>1147612</u>

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 in those cases where the connection is not regulated and inspected by the local Sanitary District OR <input type="checkbox"/> HOOK UP: to an existing subsurface wastewater disposal system		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	2	Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures OR <input type="checkbox"/> TRANSFER FEE (\$6.00)		Urinal	2	Sink
		Drinking Fountain		Wash Basin
		Indirect Waste	2	Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
				Fixtures (Subtotal) Column 2
				Total Fixtures
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee
				(Total)

RECEIVED
 FEB 01 2012

Dept. of Building Inspections
 State of Maine