



PLUMBING PERMIT APPLICATION

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

PERMIT INFORMATION		
This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ <div style="background-color: #90EE90; padding: 5px; text-align: center; font-weight: bold;">Please call 874-8703 with your permit # to schedule inspections!</div>	Plumbing to be Installed by: NAME: _____ 1. <input 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 #
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 Number Type of Fixture
_ _ HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	_ _ Hosebib / Sillcock _ _ Floor Drain _ _ Urinal _ _ Drinking Fountain _ _ Indirect Waste	_ _ Bathtub (and Shower) _ _ Shower (separate) _ _ Sink _ _ Wash Basin _ _ Water Closet (Toilet)
_ _ HOOK-UP: to an existing subsurface wastewater disposal system	_ _ Water Treatment Softener, Filter, Etc. _ _ Grease / Oil Separator _ _ Roof Drain	_ _ Clothes Washer _ _ Dish Washer _ _ Garbage Disposal
_ _ PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	_ _ Bidet _ _ Other: _____	_ _ Laundry Tub _ _ Water Heater
OR	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	TOTAL FIXTURES _ _ _ _ _ _
		Hook-Up & Relocation Fee _ _
Please call 874-8703 with your permit # to schedule inspections!		PERMIT FEE (TOTAL)



Jeff Levine, AICP, Director
Planning & Urban Development Department

Tammy Munson, Director
Inspections Division

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are **paid in full** to the Inspections Office, City of Portland Maine by method noted below:

Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.

Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.

I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature:

Date:

I have provided digital copies and sent them on:

Date:

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.