



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 238-242 Brackett St.

CBL: 055-B-020-001

PROPERTY OWNER(S) NAME

OWNER NAME: Dennis B. MARTIN

Applicant Name: Homekeepers LLC

Mailing Address of Owner/Applicant (if Different) 217 Brackett St. PORTLAND, ME 04102

E Mail: dennyjrdaddy@yahoo.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]
Signature of Owner/Applicant

Date _____

Town/City PORTLAND

Permit # _____

Date Permit Issued 4/1/11 Fee: \$ _____ Double Fee Charged []

Local Plumbing Inspector Signature _____

L.P.I. # 360

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

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

Type of Structure to be Served

- 1. SINGLE FAMILY RESIDENCE
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER-SPECIFY _____

Please call 874-8703 with your permit # to schedule inspections!

Plumbing to be Installed by:

NAME: Darin Plumbing

- 1. MASTER PLUMBER
- 2. OIL BURNERMAN
- 3. MFG'D HOUSING DEALER / MECHANIC
- 4. PUBLIC UTILITY EMPLOYEE
- 5. PROPERTY OWNER

LICENSE # M57167

	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
<input type="checkbox"/> HOSEBIB / SILLCOCK	<input type="checkbox"/>	Hosebib / Sillcock	<input checked="" type="checkbox"/>	Bathtub (and Shower)
<input type="checkbox"/> FLOOR DRAIN	<input type="checkbox"/>	Floor Drain	<input checked="" type="checkbox"/>	Shower (separate)
<input type="checkbox"/> URINAL	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/>	Sink
<input type="checkbox"/> DRINKING FOUNTAIN	<input type="checkbox"/>	Drinking Fountain	<input checked="" type="checkbox"/>	Wash Basin
<input type="checkbox"/> INDIRECT WASTE	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
<input type="checkbox"/> WATER TREATMENT SOFTENER, FILTER, ETC.	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
<input type="checkbox"/> GREASE / OIL SEPARATOR	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
<input type="checkbox"/> ROOF DRAIN	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/> BIDET	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/> OTHER: _____	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
Fixtures (Subtotal) Column 2			4	Fixtures (Subtotal) Column 1
				TOTAL FIXTURES
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				PERMIT FEE (TOTAL)

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TRANSFER FEE [\$10.00]

Fees:
\$10 Surcharge + First 4 fixtures = \$50 Minimum
Over 4 = \$10 Surcharge + \$10/fixture