

11164

057 3009

Department of Health and Human Services
Division of Environmental Health

PLUMBING APPLICATION

PROPERTY ADDRESS

Town or Plantation Portland
 Street or Subdivision Lot # 14 Taylor St 1-2+3

PROPERTY OWNER(S) NAME

Last: Murphy First: James
 Applicant Name: Bary Holden

Mailing Address of Owner/Applicant (if Different) 47 Misty Ln
Brookfield 04010

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 [Signature] Date 12-12-12

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City Portland Permit # _____

Date Permit Issued 12/12/12 Fee: \$ _____ Double Fee Charged

Local Plumbing Inspector Signature _____ L.P.I. # 360

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.

LPI Signature _____ Date Approved _____

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.

CAUTION: INSPECTION REQUIRED

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

Date Approved (Rough-in) _____

Local Plumbing Inspector Signature _____ Date Approved (Final) _____

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PERMIT INFORMATION

This Application is for **RECEIVED**
DEC 12 2012
 Dept. of Building Inspections
 City of Portland Maine

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 _____**

Plumbing to be installed by:

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

LICENSE # 2014

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 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.		<input type="checkbox"/> Hosebib / Sillcock	<input type="checkbox"/>	<input type="checkbox"/> Bathtub (and Shower)
		<input type="checkbox"/> Floor Drain	<input type="checkbox"/>	<input type="checkbox"/> Shower (separate)
		<input type="checkbox"/> Urinal	<input type="checkbox"/>	<input type="checkbox"/> Sink
		<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/>	<input type="checkbox"/> Wash Basin
		<input type="checkbox"/> Indirect Waste	<input type="checkbox"/>	<input type="checkbox"/> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	<input type="checkbox"/> Clothes Washer
		<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/>	<input type="checkbox"/> Dish Washer
		<input type="checkbox"/> Roof Drain	<input type="checkbox"/>	<input type="checkbox"/> Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		<input type="checkbox"/> Bidet	<input type="checkbox"/>	<input type="checkbox"/> Laundry Tub
		<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/> Water Heater
		<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/>	<input type="checkbox"/> Fixtures (Subtotal) Column 1
			<input type="checkbox"/>	<input type="checkbox"/> Fixtures (Subtotal) Column 2
OR			12	TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE (\$10.00)				Fixture Fee
				Transfer Fee
		SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE		Hook-Up & Relocation Fee
				PERMIT FEE (TOTAL)
	<input type="checkbox"/> Owner	<input type="checkbox"/> Town Copy	<input type="checkbox"/> State Copy	