



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 211 Danforth St  
 CBL: 87 E 8

## PROPERTY OWNER(S) NAME

NAME: Keith Hickman  
 Applicant Name: The M.J. Company  
 Mailing Address of Owner/Applicant (if Different): 19 Wyndham St Portland ME 04103

### 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] Date Dec 17, 2014  
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2014-02902  
 Date Permit Issued 12/19/14 Fee: \$ 50 Double Fee Charged [ ]

Local Plumbing Inspector Signature [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.

\_\_\_\_\_  
 Date Approved (Rough-in)  
 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 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>Restaurant</u></p> <p><b>Please call 874-8703 with your permit # to schedule inspections!</b></p>	<p><b>Plumbing to be Installed by:</b></p> <p>NAME: <u>David DiBona</u></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>6615</u></p>																																																								
<p><b>Hook-Up &amp; Piping Relocation</b>          Maximum of 1 Hook-Up</p> <p><input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</p> <p><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</p> <p><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p><b>OR</b></p> <p><input type="checkbox"/> TRANSFER FEE [\$10.00]</p>	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td></tr> <tr><td><input checked="" type="checkbox"/></td><td><b>Fixtures (Subtotal) Column 2</b></td></tr> </tbody> </table> <p>Fees by fixture:          First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge</p>	Number	Column 2 Type of Fixture	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	<b>Fixtures (Subtotal) Column 2</b>	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/></td><td>Sink</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input checked="" type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td><input type="checkbox"/></td><td>Water Heater</td></tr> <tr><td><input checked="" type="checkbox"/></td><td><b>Fixtures (Subtotal) Column 1</b></td></tr> <tr><td><input type="checkbox"/></td><td><b>TOTAL FIXTURES</b></td></tr> <tr><td><input type="checkbox"/></td><td>Fixture Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Transfer Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Hook-Up &amp; Relocation Fee</td></tr> </tbody> </table> <p><b>PERMIT FEE (TOTAL)</b></p>	Number	Column 1 Type of Fixture	<input type="checkbox"/>	Bathtub (and Shower)	<input type="checkbox"/>	Shower (separate)	<input type="checkbox"/>	Sink	<input checked="" type="checkbox"/>	Wash Basin	<input checked="" type="checkbox"/>	Water Closet (Toilet)	<input type="checkbox"/>	Clothes Washer	<input type="checkbox"/>	Dish Washer	<input type="checkbox"/>	Garbage Disposal	<input type="checkbox"/>	Laundry Tub	<input type="checkbox"/>	Water Heater	<input checked="" type="checkbox"/>	<b>Fixtures (Subtotal) Column 1</b>	<input type="checkbox"/>	<b>TOTAL FIXTURES</b>	<input type="checkbox"/>	Fixture Fee	<input type="checkbox"/>	Transfer Fee	<input type="checkbox"/>	Hook-Up & Relocation Fee
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STATE OF MAINE  
DEPT OF PROFESSIONAL & FINANCIAL REGULATION  
PLUMBERS EXAMINING BOARD

LICENSE # MS60006615

**DAVID A. DIBIASE**  
**LICENSED MASTER PLUMBER**

ISSUED Jul 01, 2014 EXPIRES Jun 30, 2016

**STATE OF MAINE**  
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
35 STATE HOUSE STATION  
AUGUSTA, MAINE 04333-0035  
(207) 624-8627

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*David A. DiBiase*

SIGNATURE REQUIRED