



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 284 Bonforth St Portland

CBL: 057-FOO1

## PROPERTY OWNER(S) NAME

NAME: Portland Housing Authority

Applicant Name: Portland Housing Authority

Mailing Address of Owner/Applicant (if Different) 14 Baxter Blvd Portland, ME 04101

### 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 \_\_\_\_\_

Date \_\_\_\_\_

Town/City PORTLAND

Permit # \_\_\_\_\_

Date Permit Issued 1/1/ Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]

L.P.I. # 360

Local Plumbing Inspector Signature \_\_\_\_\_

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

### 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: Gibral for Construction

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

LICENSE # | | | | | | | | | |

| Hook-Up & Piping Relocation<br>Maximum of 1 Hook-Up  | Column 2<br>Number Type of Fixture  | Column 1<br>Number 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 / Silcock  | <input type="checkbox"/> Bathtub (and Shower)   |
|  | <input type="checkbox"/> Floor Drain  | <input type="checkbox"/> Shower (separate)  |
|  | <input type="checkbox"/> Urinal   | <input type="checkbox"/> Sink   |
|  | <input type="checkbox"/> Drinking Fountain  | <input type="checkbox"/> Wash Basin   |
|  | <input type="checkbox"/> Indirect Waste   | <u>1/1/9</u> <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"/> Clothes Washer   |
|  | <input type="checkbox"/> Grease / Oil Separator                                       | <input type="checkbox"/> Dish Washer  |
|  | <input type="checkbox"/> Roof Drain   | <input type="checkbox"/> Garbage Disposal   |
|  | <input type="checkbox"/> Bidet  | <input type="checkbox"/> Laundry Tub  |
|  | <input type="checkbox"/> Other: _____   | <input type="checkbox"/> Water Heater   |
| <b>OR</b>  | <input type="checkbox"/> Fixtures (Subtotal) Column 2                                 | <u>1/1/9</u> <input type="checkbox"/> Fixtures (Subtotal) Column 1                              |
| <input checked="" type="checkbox"/> TRANSFER FEE [\$10.00]   | Fees by fixture:<br>First 4 fixtures = \$40 Over 4 = \$10/fixture<br>+ \$10 Surcharge | <u>1/1/9</u> <b>TOTAL FIXTURES</b><br><u>1,190.00</u> Fixture Fee<br><u>110.00</u> Transfer Fee |
|  |   | <input type="checkbox"/> Hook-Up & Relocation Fee   |
| <b>Please call 874-8703 with your permit # to schedule inspections!</b>  |   | <u>1,200.00</u> PERMIT FEE (TOTAL)  |

CBL

057 F001

Harbor Terrace

Building

1

119

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