

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation Portland CBL-061 Footfoot
Street or Subdivision Lot # 17 Fletcher St

Town/City Portland, ME Permit # 2017-07380

Date Permit Issued 10/6/17 Fee: \$ 910.00 Double Fee Charged []

PROPERTY OWNER(S) NAME

Last: Wayn Hete School
Applicant Name: Johnson + Jordan Mech.
Mailing Address of Owner/Applicant (if Different) 18 Mussey Rd
Scarborough, ME 04074
Owner/Applicant Statement

Local Plumbing Inspector Signature
Fee: \$ _____ State min. fee \$ _____ Locally adopted fee
Copy: [] Owner [] Town [] State Map # _____ Lot # _____ Local

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.

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.

Johnson Jordan 10-2-17
Signature of Owner/Applicant Date

Caution: Inspection Required

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

[Signature] 10-2-17
LPI Signature Date Approved (Rough-in)
Date Approved (Final)

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED</p> <p style="text-align: center;">OCT 06 2017</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</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>School</u></p>	<p>Plumbing to be Installed by:</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>02460</u></p>
<p>Hook-Up & Piping Relocation 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>Column 2 Number Type of Fixture</p> <p><input type="checkbox"/> <u>5</u> Hosebib / Sillcock</p> <p><input type="checkbox"/> <u>8</u> Floor Drain</p> <p><input type="checkbox"/> Urinal</p> <p><input type="checkbox"/> <u>3</u> Drinking Fountain</p> <p><input type="checkbox"/> <u>3</u> Indirect Waste</p> <p><input type="checkbox"/> Water Treatment Softener, Filter, Etc.</p> <p><input type="checkbox"/> <u>2</u> Grease Oil Separator <u>solids</u></p> <p><input type="checkbox"/> <u>1</u> <u>1</u> Roof Drain</p> <p><input type="checkbox"/> Bidet</p> <p><input type="checkbox"/> <u>1</u> Other: <u>Eye Wash</u></p> <p><input type="checkbox"/> <u>2</u> <u>3</u> Fixtures (Subtotal) Column 2</p>	<p>Column 1 Number Type of Fixture</p> <p><input type="checkbox"/> Bathtub (and Shower)</p> <p><input type="checkbox"/> Shower (separate)</p> <p><input type="checkbox"/> <u>2</u> <u>0</u> Sink</p> <p><input type="checkbox"/> <u>1</u> <u>4</u> Wash Basin</p> <p><input type="checkbox"/> <u>1</u> <u>8</u> Water Closet (Toilet)</p> <p><input type="checkbox"/> <u>2</u> Clothes Washer</p> <p><input type="checkbox"/> Dish Washer</p> <p><input type="checkbox"/> Garbage Disposal</p> <p><input type="checkbox"/> <u>1</u> Laundry Tub</p> <p><input type="checkbox"/> <u>2</u> Water Heater</p> <p><input type="checkbox"/> <u>5</u> <u>7</u> Fixtures (Subtotal) Column 1</p> <p><input type="checkbox"/> Fixtures (Subtotal) Column 2</p>
OR		80 TOTAL FIXTURES
<p><input type="checkbox"/> TRANSFER FEE [\$10.00]</p>	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	<p>Fixture Fee</p> <p>Transfer Fee</p> <p>Hook-Up & Relocation Fee</p>
		PERMIT FEE (TOTAL)
	<p><input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input type="checkbox"/> State Copy</p>	