



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: Park ave 340
 CBL: 065 A003 001

PROPERTY OWNER(S) NAME
 OWNER NAME: LaQuinta Inn and Suites
 Applicant Name: Johnson and Jordan
 Mailing Address of Owner/Applicant (if Different): 18 Mussey Rd, Scarborough, Me 04074
 E Mail: ahaskell@johnsonandjordan.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 of Owner/Applicant: Christopher Jordan Date: 11/09/17

Town/City PORTLAND Permit # 2017-02421
 Date Permit Issued 11/13/17 Fee: \$ 120.00 Double Fee Charged
 Local Plumbing Inspector Signature _____ L.P.I. # 1081
 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) 11-13-2017

PERMIT INFORMATION		
<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED NOV 13 2017 Permitting & 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 _____</p> <p>Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Christopher Jordan</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>02460</u></p>
Hook-Up & Piping Relocation Maximum of 4 Hook-Ups	Column 2 Number Type of Fixture	Column 1 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 / Sillcock	<u>1</u> <input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<u>1</u> <input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<u>4</u> <input type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<u>3</u> <input type="checkbox"/> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<u>1</u> <input type="checkbox"/> Water Treatment Softener, Filler, Etc.	<input type="checkbox"/> Clothes Washer
	<u>1</u> <input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> Dish Washer
	<input type="checkbox"/> Roof Drain	<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"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
OR	Fixtures (Subtotal) Column 2	Fixtures (Subtotal) Column 1
		<u>11</u> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE \$[10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<u>110</u> Fixture Fee
		<u>10</u> Transfer Fee <i>surcharge</i>
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		<u>120</u> PERMIT FEE (TOTAL)