

PLUMBING PERMIT APPLICATION

PROPERTY ADD	RESS		
Street:		Town/City PORTLAND	Permit #
CBL:		Date Permit Issued 🚬 / 🦯	Fee: \$Double Fee Charged []
PROPERTY OWNER(S) NAME owner name:		L.P.I. # 360 Local Plumbing Inspector Signature	
Applicant Name: Mailing Address of Owner/Applicant (if Different)		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.	
E Mail:			
Owner/Applicant Statement		Caution: Inspection Required	
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.		I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.	
Signature of Owner/Applicant	Date _	LPI Signature	Date Approved (Final)
	PERMIT	INFORMATION	
This Application is for	Type of Structure to be Served		Plumbing to be Installed by:
1. NEW PLUMBING	1. U SINGLE FAMILY RESIDENCE		NAME:
2. RELOCATED PLUMBING			1. 🗌 MASTER PLUMBER
			2. 🗌 OIL BURNERMAN
			3. 🗌 MFG'D HOUSING DEALER / MECHANIC
			5. 🗌 PROPERTY OWNER
			LICENSE #
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Co Number	olumn 2 Type of Fixture	Column 1 Number Type of Fixture
HOOK-UP: to public sewer by	Hosebib /		Bathtub (and Shower)
those cases where the	Floor Drain		Shower (separate)
connection is not regulated and	_ Urinal		_ Sink
inspected by the local sanitary	_ Drinking Fountain		_ _ Wash Basin
district.	Indirect Waste		_ Water Closet (Toilet)
wastewater disposal system	Water Treatment Softener, Filter, Etc.		_ Clothes Washer
	·	Oil Separator	Dish Washer
	Roof Drai	n	Garbage Disposal
PIPING RELOCATION: of sanitary	Bidet		Laundry Tub
lines, drains, and piping without new fixtures.	Other:	ubtotal) Column 2	Image: Mater Heater Image: Mater Image: Mater H
OR		ubiolal) Column 2	TOTAL FIXTURES
	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum		Fixture Fee
TRANSFER FEE [\$10.00]		Irst 4 fixtures = \$50 Minimum Surcharge + \$10/fixture	Transfer Fee
			Hook-Up & Relocation Fee
Please call 874-8703 with your	permit # to sched	ule inspections!	PERMIT FEE (TOTAL)





Jeff Levine, AICP, Director Planning & Urban Development Department Tammy Munson, Director Inspections Division

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a *legal signature* per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are *paid in full* to the Inspections Office, City of Portland Maine by method noted below:

Within 24-48 hours, upon receipt of an e-mailed invoice from Building Inspections, which signifies that my electronic permit application and corresponding paperwork have been received, determined complete, entered by an administrative representative, and assigned a permit number, I then have the following payment options:

provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment

hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall

deliver a payment method through the U.S. Postal Service, at the following address:

City of Portland, Inspections Division 389 Congress Street, Room 315 Portland, Maine 04101

Once my payment has been received, this starts the review process of my permit. I understand that after all approvals have been completed, I will then be issued my permit via e-mail. <u>No work shall be started until I have received my permit.</u>

Applicant Signature: _____Date: _____

I have provided digital copies and sent them on (Date:)

NOTE: All electronic paperwork must be delivered to <u>buildinginspections@portlandmaine.gov</u> or by physical means ie; a thumb drive or CD to the office.

389 Congress Street * Portland Maine 04101-3509 * Phone: (207) 874-8703 * Fax: (207) 874-8716 (rev 06-14-12) http://www.portlandmaine.gov/planning/buildinsp.asp * E-Mail: buildinginspections@portlandmaine.gov