



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	89 Pleasant Ave
CBL:	Peaks Island
PROPERTY OWNER(S) NAME	
NAME:	Rory Sellers
Applicant Name:	Jesse Mantsch
Mailing Address of Owner/Applicant (if Different)	101 Luther St Peaks Island
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.	
Jesse Mantsch	4/9
Signature of Owner/Applicant	Date

Town/City: PORTLAND	Permit # _____
Date Permit Issued: / /	Fee: \$ _____ Double Fee Charged []
L.P.I. # 360	
Local Plumbing Inspector Signature _____	
<p>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.</p> <p style="text-align: center;">Caution: Inspection Required</p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p>	
_____	Date Approved (Rough-in)
LPI Signature	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>Type of Structure to be Served</p> <p>1 <input checked="" 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 type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: _____</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>ms90009344</u></p>
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	Column 2		Column 1	
	Number	Type of Fixture	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.	01	Hosebib / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (separate)
		Urinal	01	Sink
		Drinking Fountain	01	Wash Basin
		Indirect Waste	01	Water Closet (Toilet)
		Water Treatment Softener, Filter, Etc.		Clothes Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		Grease / Oil Separator	01	Dish Washer
		Roof Drain		Garbage Disposal
		Bidet		Laundry Tub
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Other: _____	01	Water Heater
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
OR			06	TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge			Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! PERMIT FEE (TOTAL)