



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 11 Park Ave  
 CBL: Peaks Island

## PROPERTY OWNER(S) NAME

OWNER NAME: Tom Munroe  
 Applicant Name: Derek Locke

Mailing Address of Owner/Applicant (if Different) 26 High Point Rd  
Scarborough ME

E Mail: Casco Bay Plumbing@yahoo.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: [Signature] Date: 3/23/16

Town/City PORTLAND Permit # 2016-00676

Date Permit Issued 3/23/16 Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

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): \_\_\_\_\_

## PERMIT INFORMATION

This Application is for  
 NEW PLUMBING  
 RELOCATED PLUMBING

**RECEIVED**  
 MAR 23 2016  
 Dept. of Building Inspections  
 City of Portland Maine

Type of Structure to be Served

- SINGLE FAMILY RESIDENCE
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER-SPECIFY \_\_\_\_\_

**Please call 874-8703 with your permit # to schedule inspections!**

Plumbing to be Installed by:

NAME: \_\_\_\_\_

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D HOUSING DEALER / MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # MS90013406

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	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.	<input type="checkbox"/>	Hosebib / Sillcock	<input checked="" type="checkbox"/>	Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Floor Drain	<input checked="" type="checkbox"/>	Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
	<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 checked="" type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	<input checked="" type="checkbox"/>	<b>Fixtures (Subtotal) Column 2</b>	<input checked="" type="checkbox"/>	<b>Fixtures (Subtotal) Column 1</b>
			<input checked="" type="checkbox"/>	<b>TOTAL FIXTURES</b>
			<input type="checkbox"/>	Fixture Fee
			<input type="checkbox"/>	Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee
			<input checked="" type="checkbox"/>	<b>PERMIT FEE (TOTAL)</b>

Fees:  
 \$10 Surcharge + First 4 fixtures = \$50 Minimum  
 Over 4 = \$10 Surcharge + \$10/fixture

**\$80** — **PERMIT FEE (TOTAL)**

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