

## PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS				
Street: Upper A St Deaks Is		Town/City PORTLAND	Permit # 20/	5-00407
CBL: 87 II 32		Date Permit Issued 3/9//5Fee: \$_/00Double Fee Charged □		
PROPERTY OWNER(S) NAME		IA	<u></u>	odbie i ee charged []
OWNER NAME:		L.P.I. # 360		
Applicant Name:		Local Plumbing Inspector Signature		
		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		
Mailing Address of Owner/Applicant (if Different)  Mailing Address of Owner/Applicant (if Different)				
(if Different) RILLAGON Me. 04005		Maine Subs	ig system in accordance w urface Wastewater Dispos	ith this application and the
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 3/5/15		LPI Signature		
				Date Approved (Final)
	DEDMIT	NFORMATION		(i iiiai)
		NFURIVIATION	Distriction 4	h-1
This Application is for	Type of Struc	ture to be Served		be installed by:
1. NEW PLUMBING			NAME: MJKE	Beaudoin
	1. SINGLE FAMILY RESIDENCE		E Mail:	
2. RELOCATED PLUMBING	2. MODULAR OR MOBILE HOME		1. MASTER PLUMBER	
	3. MULTIPLE FAMILY DWELLING  4. OTHER-SPECIFY  Please call 874-8703 with your permit # to schedule inspections!		2. OIL BURNERMAN  3. MFG'D HOUSING DEALER / MECHANIC	
			4. PUBLIC UTILITY EMPLOYEE	
			pections! 5. PROPERTY OWNER	
Hook-Up & Piping Relocation	Column 2		LICENSE # 16121619141 1 1 1 1	
Maximum of 1 Hook-Up	Number Type of Fixture			ımn 1 Type of Fixture
☐ HOOK-UP: to public sewer by	Hosebib / Sillcock		/   Bathtub (a	nd Shower)
those cases where the	Floor Drain		/   Shower (s	eparate)
connection is not regulated	Urinal		l   Sink	
and inspected by the local	Drinking Fountain		2   Wash Bas	
sanitary district.  HOOK-UP: to an existing subsurface			3   Water Clos	set (I oilet)
wastewater disposal system	Water Treatment Softener, Filter,Etc.		/   Clothes W	asher
	Grease / Oil Separator		Dish Washer	
☐ PIPING RELOCATION: of sanitary	Roof Drain		Garbage Disposal	
lines, drains, and piping without new fixtures.	Bidet   Other:		Laundry Ti	
The second of the piping without new materies.	Fixtures (Subtotal) Column 2		/   Water Hea	
OR	T intuites (Gubtotal) Column 2			ubtotal) Column 1 FAL FIXTURES
	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/per fixture			
TRANSFER FEE [\$10.00]			•	ure Fee nsfer Fee
	IIXUIG			& Relocation Fee
Please call 874-8703 with your r	ormit # to ochodu	1		DEDMIT FEE TOTAL