



# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	Town/City PORTLAND Permit # _____
CBL:	Date Permit Issued ____ / ____ / ____ Fee: \$ _____ Double Fee Charged [ ]
PROPERTY OWNER(S) NAME	
NAME:	L.P.I. # <b>360</b>
Applicant Name:	Local Plumbing Inspector Signature _____
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.
<b>Owner/Applicant Statement</b>	<b>Caution: Inspection Required</b>
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 _____	_____ Date Approved (Rough-in)
	_____ LPI Signature _____ Date Approved (Final)

PERMIT INFORMATION		
<b>This Application is for</b> 1. <input type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure to be Served</b> 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____  <b>Please call 874-8703 with your permit # to schedule inspections!</b>	<b>Plumbing to be Installed by:</b> <b>NAME:</b> _____ 1. <input type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER  LICENSE #
<b>Hook-Up &amp; Piping Relocation</b> Maximum of 1 Hook-Up	<b>Column 2</b> Number Type of Fixture	<b>Column 1</b> Number Type of Fixture
HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.	Hosebib / Sillcock	Bathtub (and Shower)
	Floor Drain	Shower (separate)
	Urinal	Sink
	Drinking Fountain	Wash Basin
	Indirect Waste	Water Closet (Toilet)
HOOK-UP: to an existing subsurface wastewater disposal system	Water Treatment Softener, Filter, Etc.	Clothes Washer
	Grease / Oil Separator	Dish Washer
	Roof Drain	Garbage Disposal
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Bidet	Laundry Tub
	Other: _____	Water Heater
	<b>      Fixtures (Subtotal) Column 2</b>	<b>      Fixtures (Subtotal) Column 1</b>
<b>OR</b>		<b>      TOTAL FIXTURES</b>
<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
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>PERMIT FEE (TOTAL)</b>