



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 101 Concord St.

CBL:

## PROPERTY OWNER(S) NAME

OWNER NAME: *Ha-Ngoc, Tin + Elizabeth*

Applicant Name: *Mainely Plumbing + Heating Inc*

Mailing Address of Owner/Applicant (if Different): *674 Main St  
Gorham, ME 04038*

E Mail: *jim@mainelyplumbing.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.

*Athy Rothrock* 9/24/15  
Signature of Owner/Applicant Date

*for Mainely Plumbing + Hg.*

Town/City PORTLAND Permit # \_\_\_\_\_

Date Permit Issued \_\_\_ / \_\_\_ / \_\_\_ Fee: \$ \_\_\_\_\_ Double Fee Charged

L.P.I. # 360

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 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

- 1.  NEW PLUMBING
- 2.  RELOCATED PLUMBING

### Type of Structure to be Served

- 1.  SINGLE FAMILY RESIDENCE
- 2.  MODULAR OR MOBILE HOME
- 3.  MULTIPLE FAMILY DWELLING
- 4.  OTHER-SPECIFY \_\_\_\_\_

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

### Plumbing to be Installed by:

NAME: James Robinson

- 1.  MASTER PLUMBER
- 2.  OIL BURNERMAN
- 3.  MFG'D HOUSING DEALER / MECHANIC
- 4.  PUBLIC UTILITY EMPLOYEE
- 5.  PROPERTY OWNER

LICENSE # MS2401

### Hook-Up & Piping Relocation Maximum of 1 Hook-Up

HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

HOOK-UP: to an existing subsurface wastewater disposal system

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE [\$10.00]

### Column 2

Number Type of Fixture

<input type="checkbox"/>	Hosebib / Sillcock
<input type="checkbox"/>	Floor Drain
<input type="checkbox"/>	Urinal
<input type="checkbox"/>	Drinking Fountain
<input type="checkbox"/>	Indirect Waste
<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.
<input type="checkbox"/>	Grease / Oil Separator
<input type="checkbox"/>	Roof Drain
<input type="checkbox"/>	Bidet
<input type="checkbox"/>	Other: _____
<b>0</b>	<b>Fixtures (Subtotal) Column 2</b>

### Fees:

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

### Column 1

Number Type of Fixture

<input type="checkbox"/>	1	Bathtub (and Shower)
<input type="checkbox"/>	1	Shower (separate)
<input type="checkbox"/>	1	Sink
<input type="checkbox"/>	4	Wash Basin
<input type="checkbox"/>	2	Water Closet (Toilet)
<input type="checkbox"/>		Clothes Washer
<input type="checkbox"/>		Dish Washer
<input type="checkbox"/>		Garbage Disposal
<input type="checkbox"/>		Laundry Tub
<input type="checkbox"/>		Water Heater
<b>9</b>	<b>9</b>	<b>Fixtures (Subtotal) Column 1</b>

**TOTAL FIXTURES**

90 Fixture Fee  
     Transfer Fee

     Hook-Up & Relocation Fee

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

100

**PERMIT FEE (TOTAL)**