

# 11195

Maine Dept. Health & Human Services  
Div of Environmental Health, 11 SHS  
207) 287-5672 Fax: (207) 287-4172

**PLUMBING APPL**

>> CAUTION: LPI APPROVAL REQUIRED <<

**PROPERTY ADDRESS**

City, Town, or Plantation: Portland  
Street or Road: 22 Osborn St.  
Subdivision, Lot #: 132 FO10

Town/City: Portland Permit # 201300192

Date Permit Issued: 1/1 Fee: \$ 60 Double Fee Charged:

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

**PROPERTY OWNERS NAME**

Name (last, first, MI): Marcus Howell  Owner  Applicant

Mailing Address of Home / Applicant: Marcus Pkt 624 Main  
Port-Ham 04038

Daytime Tel. #: 207-854-4969

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 Internal Plumbing Rules.

**CAUTION: INSPECTION REQUIRED**

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

**OWNER OR APPLICANT STATEMENT**  
I hereby state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.

Signature of Owner or Applicant: [Signature] Date: \_\_\_\_\_

Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved (Rough-In): \_\_\_\_\_  
Date Approved (Final): \_\_\_\_\_

**PERMIT INFORMATION**

This Application is For  
1.  NEW PLUMBING INSTALLATION  
2.  RELOCATED PLUMBING

Type of Structure To Be Served  
1.  SINGLE FAMILY DWELLING  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER-SPECIFY \_\_\_\_\_

Plumbing To Be Installed By  
1.  MASTER PLUMBER  
2.  MFG'D HOUSING DEALER/MECHANIC  
3.  PUBLIC UTILITY EMPLOYEE  
4.  PROPERTY OWNER

**RECEIVED**  
JAN 29 2013

LICENSE # M.S. 244011

Dept. of Building Inspections  
City of Portland, Maine

FO10  
132

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 in those cases where the connection is not regulated and inspected by the local Sanitary District  <b>OR</b> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system  <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains and piping without new fixtures		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal	1	Sink
		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.	1	Clothes Washer
		Grease / Oil Separator	1	Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
<input type="checkbox"/> <b>OR</b> TRANSFER FEE (S.6.00)		Fixtures (Subtotal) Column 2	15	Fixtures (Subtotal) Column 1
			1	Fixtures (Subtotal) Column 2
			50	<b>Total Fixtures</b>
				<b>Fixture Fee</b>
				<b>Transfer Fee</b>
			<b>Hook-Up &amp; Relocation Fee</b>	
			<b>Permit Fee</b>	
			<b>(Total)</b>	

710 \$60.00