

# PLUMBING

# 11208

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

PROPER

>> CAUTION: LPI APPROVAL REQUIRED <<

City, Town, or Plantation: Portland  
Street or Road: 459 Stevens Ave  
Subdivision, Lot #: 2013-00335

Town/City: Portland Permit #: 2013-00335  
Date Permit Issued: 2/19/13 Fee: \$ 40 Double Fee Charged [ ]

**PROPERTY OWNERS NAME**

Name (last, first, MI): Rice, Geoffrey (owner)  Owner  Applicant  
Mailing Address of Owner/Applicant: 658 Conger St, Portland ME, 04107  
Daytime Tel. #: 773-1914 / call applicant # 857-540-2675

Local Plumbing Inspector Signature: \_\_\_\_\_ L.P.I. #: \_\_\_\_\_

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.

**OWNER OR APPLICANT STATEMENT**  
I 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.  
Carlo Doria 2/15/13  
Signature of Owner or Applicant Date

**CAUTION: INSPECTION REQUIRED**  
I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.  
Local Plumbing Inspector Signature: \_\_\_\_\_ Date Approved (Final): \_\_\_\_\_  
Date Approved (Rough-In): \_\_\_\_\_

**PERMIT INFORMATION**

<b>This Application Is For</b> 1. <input type="checkbox"/> NEW PLUMBING INSTALLATION 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	<b>Type of Structure To Be Served</b> 1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Hair Salon</u>	<b>Plumbing To Be Installed By</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC 3. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 4. <input type="checkbox"/> PROPERTY OWNER  LICENSE # <u>M51711617</u>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number	Type of Fixture	Column 1 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		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures		Urinal		Sink
		Drinking Fountain		Wash Basin
<input type="checkbox"/> TRANSFER FEE (\$10.00)		Indirect Waste		Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.		Clothes Washer
Phone: <u>799-0066</u>  <u>Carlo Doria</u>		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
23 waterhouse road cape elizabeth, ME 04107		Bidet		Laundry Tub
	<u>3</u>	Other: <u>Red Seats</u>		Water Heater
		Fixtures (Subtotal) Column 2	<u>10</u>	Fixtures (Subtotal) Column 1
			<u>3</u>	Fixtures (Subtotal) Column 2
			<u>3</u>	<b>Total Fixtures</b>
				Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
				Permit Fee
				<b>(Total)</b>