



# PLUMBING PERMIT APPLICATION

**PROPERTY ADDRESS**  
 Street: 14/16 Alba St.  
 CBL: 133 C013

**PROPERTY OWNER(S) NAME**  
 OWNER NAME: Emily + Chris Hickey  
 Applicant Name: Derek Locke

Mailing Address of Owner/Applicant (if Different) 26 High Point Rd Scarborough ME 04074  
 E Mail: coascobayplumbing@yahoo.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.  
DL 5/23/16  
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 201601338  
 Date Permit Issued 5/23/16 Fee: \$ 110 Double Fee Charged [ ]  
 Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

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

**RECEIVED**  
**MAY 23 2016**  
 Dept. of Building Inspections  
 City of Portland Maine

**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: Derek Locke

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

LICENSE # MS90013406

**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]

Number	Column 2 Type of Fixture
<input type="checkbox"/>	Hosebib / Silcock
<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>100</b>	<b>Fixtures (Subtotal) Column 2</b>
Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	

Number	Column 1 Type of Fixture
<b>02</b>	Bathtub (and Shower)
<input type="checkbox"/>	Shower (separate)
<b>02</b>	Sink
<b>02</b>	Wash Basin
<b>02</b>	Water Closet (Toilet)
<b>02</b>	Clothes Washer
<input type="checkbox"/>	Dish Washer
<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/>	Water Heater
<b>101</b>	<b>Fixtures (Subtotal) Column 1</b>
<b>120</b>	<b>TOTAL FIXTURES</b>
<input type="checkbox"/>	Fixture Fee
<input type="checkbox"/>	Transfer Fee
<input type="checkbox"/>	Hook-Up & Relocation Fee

**Please call 874-8703 with your permit # to schedule inspections!** PERMIT FEE (TOTAL)