



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 485 Woodford St.

CBL: 176 A003

## PROPERTY OWNER(S) NAME

NAME: Sarah Thomson

Applicant Name: Kane Plumbing & Heating

Mailing Address of Owner/Applicant (if Different): P.O. Box 1505 Gray, ME. 04039

## 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.

[Signature] 4/22/14  
Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2014 00811

Date Permit Issued 4/22/14 Fee: \$ 50 Double Fee Charged [ ]

[Signature] 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.

[Signature] Date Approved (Rough-in)  
LPI Signature Date Approved (Final)

## PERMIT INFORMATION

This Application is for  
 NEW PLUMBING  
 RELOCATED PLUMBING

**RECEIVED**  
**APR 22 2014**  
 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: Michael Kane

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

LICENSE # MS 906 12641

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 by those cases where the connection is not regulated and inspected by the local sanitary district.	<input type="checkbox"/>	Hosebib / Silcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input checked="" type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Grease / Oil Separator	<input checked="" type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input checked="" type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2		<input type="checkbox"/> Fixtures (Subtotal) Column 1	
OR		<b>TOTAL FIXTURES</b>		
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		<input type="checkbox"/>	Fixture Fee
			<input type="checkbox"/>	Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<u>50</u>	<b>PERMIT FEE (TOTAL)</b>	