



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street: 133 Rivers Edge Drive	
CBL:	
PROPERTY OWNER(S) NAME	
OWNER NAME: Atchan Tamaki	
Applicant Name: Ronald E Leonard Jr.	
Mailing Address of Owner/Applicant PO Box 493, Bridgton ME 04009 (if Different)	
E Mail: rleonardph@gmail.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.	
Ronald E Leonard, Jr. <small>Digitally signed by Ronald E Leonard, Jr. DN: cn=Ronald E Leonard, Jr., o=, email=rleonardph@gmail.com, c=US Date: 2014.12.22 08:09:12 -0500</small>	
Signature of Owner/Applicant	Date

Town/City PORTLAND	Permit # _____
Date Permit Issued ____ / ____ / ____	Fee: \$ _____ Double Fee Charged <input type="checkbox"/>
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. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ <div style="background-color: #90EE90; padding: 5px; text-align: center;"> Please call 874-8703 with your permit # to schedule inspections! </div>	Plumbing to be Installed by: NAME: R Leonard Plumbing & Heating E Mail: rleonardph@gmail.com 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # 0 6 4 5 6
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 by those cases where the connection is not regulated and inspected by the local sanitary district.	2 Hosebib / Sillcock	1 Bathtub (and Shower)
	Floor Drain	3 Shower (separate)
	Urinal	2 Sink
	Drinking Fountain	5 Wash Basin
	Indirect Waste	4 Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	Water Treatment Softener, Filter, Etc.	1 Clothes Washer
	Grease / Oil Separator	1 Dish Washer
	Roof Drain	1 Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Bidet	Laundry Tub
	Other: _____	1 Water Heater
OR	Fixtures (Subtotal) Column 2	19 Fixtures (Subtotal) Column 1
<input type="checkbox"/> TRANSFER FEE \$[10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/per fixture	21 TOTAL FIXTURES
		Fixture Fee Transfer Fee
		Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		210 PERMIT FEE (TOTAL)