

384 A043

**PLUMBING APPLICATION**

**PROPERTY ADDRESS**

Town or Plantation: Portland

Street or Subdivision Lot #: 75 Hawthys Way

**PROPERTY OWNER(S) NAME**

Last: Flaherty First: Matt

Applicant Name: Joshua Eckhardt

Mailing Address of Owner/Applicant (if Different): 40 Old Lisbon Rd. Lewiston ME 04240

**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] 04/28/15

Signature of Owner/Applicant Date

Department of Health and Human Services  
Division of Environmental Health

Town/City: Portland Permit #: 2015-01004

Date Permit Issued: 5/8/15 Fee: 160 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.

Date Approved (Rough-in)

LPI Signature

Date Approved (Final)

**PERMIT INFORMATION**

This Application is for	Type of Structure to be Served	Plumbing to be Installed by:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING  <b>RECEIVED</b> <b>MAY 08 2015</b> <b>Dept. of Building Inspections</b> <b>City of Portland Maine</b>	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 _____	1. <input 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 # <u>11111/14322</u>
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.	<input type="checkbox"/> 2 Hosebib / Sillcock	<input type="checkbox"/> 1 Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> 1 Shower (separate)
	<input type="checkbox"/> Urinal	<input type="checkbox"/> 5 Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> 3 Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> 1 Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> 1 Dish Washer
	<input type="checkbox"/> Roof Drain	<input type="checkbox"/> Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> 1 Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 1
		<input type="checkbox"/> Fixtures (Subtotal) Column 2
<b>OR</b>		<b>15 TOTAL FIXTURES</b>
<input type="checkbox"/> TRANSFER FEE (\$10.00)		<input type="checkbox"/> Fixture Fee
		<input type="checkbox"/> Transfer Fee
	<b>SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE</b>	<input type="checkbox"/> Hook-Up & Relocation Fee
		<b>150.- PERMIT FEE (TOTAL)</b>
	<input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input type="checkbox"/> State Copy	

plumbgshat@live.com