

MAP 3 LOT 12-9

Department of Health and Human Services  
Division of Environmental Health

**PLUMBING APPLICATION**  
**PROPERTY ADDRESS**

Town or Plantation Lamoine  
Street or Subdivision Lot # 54 Boulder Cove Rd

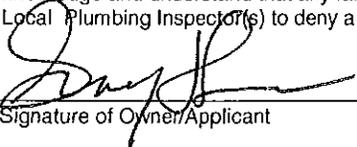
**PROPERTY OWNER(S) NAME**

Last: Belch First: Tony  
*Feeder Brook Lane.*

Applicant Name: Gregory Haass  
Mailing Address of Owner/Applicant (if Different) Po Box 1375 Ellsworth Me 04805

**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.

 5/7/15  
Signature of Owner/Applicant Date

Town/City LAMOINE Permit # 1761  
Date Permit Issued 5/7/15 Fee: \$200.00 Double Fee Charged [ ]  
 L.P.I. # 1040  
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 (Rough-in)

\_\_\_\_\_  
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	1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input type="checkbox"/> MODULAR OR MOBILE HOME	2. <input type="checkbox"/> OIL BURNERMAN
	3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING	3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC
	4. <input type="checkbox"/> OTHER-SPECIFY _____	4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE
		5. <input type="checkbox"/> PROPERTY OWNER
		LICENSE # <u>99908480</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"/> 3 Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> 1 Shower (separate)
	<input type="checkbox"/> Urinal	<input type="checkbox"/> 1 Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> 7 Wash Basin
	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> 4 Water Closet (Toilet)
<input checked="" 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"/> Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> 18 Fixtures (Subtotal) Column 1
		<input type="checkbox"/> 2 Fixtures (Subtotal) Column 2
<b>OR</b>		<input type="checkbox"/> 20 <b>TOTAL FIXTURES</b>
<input type="checkbox"/> TRANSFER FEE (\$10.00)		<input type="checkbox"/> 200.00 Fixture Fee
		<input type="checkbox"/> Transfer Fee
	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	<input type="checkbox"/> 10.00 Hook-Up & Relocation Fee
		<input type="checkbox"/> 210.00 <b>PERMIT FEE (TOTAL)</b>
	<input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input checked="" type="checkbox"/> State Copy	