

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

Town or Plantation Lamoine
Street or Subdivision Lot # Boulders Cove Rd.

Town/City LAMOINE Permit # 1810
Date Permit Issued 8/25/16 Fee: \$ 80.00 Double Fee Charged []
[Signature] L.P.I. # 1040
Local Plumbing Inspector Signature
Fee: \$ 80.00 State min. fee \$ _____ Locally adopted fee _____
Copy: [] Owner [] Town [] State Map # 3 Lot # 121 Local

PROPERTY OWNER(S) NAME

Last: Baldrige First: Megan's Daniel

Applicant Name: Michaels Plumbing

Mailing Address of Owner/Applicant (if Different) 115 Reeves Rd, Bradford Me

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] Date 8/25/16
Signature of Owner/Applicant 460-3041

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	1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE	1. <input checked="" type="checkbox"/> MASTER PLUMBER
2. <input type="checkbox"/> RELOCATED PLUMBING	2. <input checked="" 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>MS19101019151817</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"/> <u>2</u> Hosebib / Sillcock	<input type="checkbox"/> <u>2</u> 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 type="checkbox"/> <u>2</u> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> <u>2</u> 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"/> Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> 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"/> <u>0</u> Fixtures (Subtotal) Column 1
		<input type="checkbox"/> <u>2</u> Fixtures (Subtotal) Column 2
OR		<input type="checkbox"/> <u>3</u> TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE (\$10.00)		<input type="checkbox"/> <u>80</u> Fixture Fee
		<input type="checkbox"/> <u>1</u> Transfer Fee
	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	<input type="checkbox"/> _____ Hook-Up & Relocation Fee
		<input type="checkbox"/> <u>80</u> PERMIT FEE (TOTAL)
	<input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input checked="" type="checkbox"/> State Copy	