

Map 1 Lot 23-8 50 Moose Run

**PLUMBING APPLICATION**

**PROPERTY ADDRESS**

Town or Plantation Lamoine

Street or Subdivision Lot # 50 Moose Run Lane

**PROPERTY OWNER(S) NAME**

Last: Egan First: Richard

Applicant Name: Osborne's Plumbing / Heating

Mailing Address of Owner/Applicant (if Different) PO Box 1718 Bucksport ME 04416

**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.

R O Osborne 9/26/19  
Signature of Owner/Applicant Date

Town/City Lamoine Permit # 19-A

Date Permit Issued 10/1/19 Fee: \$ 170 Double Fee Charged [ ]

Rebecca Olson L.P.I. # 394  
Local Plumbing Inspector Signature

Local

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.

Rebecca Olson 10/1/19  
LPI Signature Date Approved (Rough-in)

Rebecca Olson 10/1/19  
Date Approved (Final)

**PERMIT INFORMATION**

This Application is for	Type of Structure to be Served	Plumbing to be Installed by:
<input checked="" type="checkbox"/> 1. NEW PLUMBING <input type="checkbox"/> 2. RELOCATED PLUMBING	<input checked="" type="checkbox"/> 1. SINGLE FAMILY RESIDENCE <input type="checkbox"/> 2. MODULAR OR MOBILE HOME <input type="checkbox"/> 3. MULTIPLE FAMILY DWELLING <input type="checkbox"/> 4. OTHER-SPECIFY _____	<input checked="" type="checkbox"/> 1. MASTER PLUMBER <input type="checkbox"/> 2. OIL BURNERMAN <input type="checkbox"/> 3. MFG'D HOUSING DEALER / MECHANIC <input type="checkbox"/> 4. PUBLIC UTILITY EMPLOYEE <input type="checkbox"/> 5. PROPERTY OWNER LICENSE # <u>8086</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 checked="" type="checkbox"/> 2 Hosebib / Sillcock <input type="checkbox"/> Floor Drain <input type="checkbox"/> Urinal <input type="checkbox"/> Drinking Fountain <input type="checkbox"/> Indirect Waste	<input type="checkbox"/> Bathtub (and Shower) <input checked="" type="checkbox"/> 2 Shower (separate) <input type="checkbox"/> Sink <input checked="" type="checkbox"/> 4 Wash Basin <input checked="" 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"/> Grease / Oil Separator <input type="checkbox"/> Roof Drain	<input type="checkbox"/> Clothes Washer <input type="checkbox"/> Dish Washer <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"/> Other: _____ <input checked="" type="checkbox"/> 2 Fixtures (Subtotal) Column 2	<input type="checkbox"/> Laundry Tub <input type="checkbox"/> Water Heater <input type="checkbox"/> Fixtures (Subtotal) Column 1 <input checked="" type="checkbox"/> 2 Fixtures (Subtotal) Column 2
OR		<input checked="" type="checkbox"/> 160 TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE [\$10.00]	SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE	<input checked="" type="checkbox"/> 160 <sup>00</sup> Fixture Fee <input type="checkbox"/> Transfer Fee
		<input checked="" type="checkbox"/> 170 Hook-Up & Relocation Fee
		<input checked="" type="checkbox"/> 170 PERMIT FEE (TOTAL)
	<input type="checkbox"/> Owner <input type="checkbox"/> Town Copy <input type="checkbox"/> State Copy	<input checked="" type="checkbox"/> 170