

PLUMBING APPLICATION

Maine Dept. Health & Human Services
 Div of Environmental Health, 11 SHS
 (207) 287-5672 Fax: (207) 287-4172

PROPERTY ADDRESS

City, Town, or Plantation: **Lamoine**
 Street or Road: **661 Lamoine Beach Rd**
 Subdivision, Lot #:

>> CAUTION: LPI APPROVAL REQUIRED <<

Town/City: Lamoine Permit # 1731
 Date Permit Issued 5/31/14 Fee: \$ 40. Double Fee Charged []
 L.P.I. # 1040

PROPERTY OWNERS NAME

Name (last, first, MI): **Bishop, Suzanne**
 Owner
 Applicant
 Mailing Address of Owner/Applicant: **661 Lamoine Beach Rd**
Lamoine, ME 04605
 Daytime Tel. #: **207 479-4993**

[Signature]
 Local Plumbing Inspector Signature
MAP 13 LOT 43A

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 Internal Plumbing Rules.

OWNER OR APPLICANT STATEMENT
 I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.
[Signature] 5/31/14
 Signature of Owner or Applicant Date

CAUTION: INSPECTION REQUIRED
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.
 Date Approved (Rough-In)
 Date Approved (Final)

PERMIT INFORMATION

This Application Is For 1. <input type="checkbox"/> NEW PLUMBING INSTALLATION 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____	Plumbing To Be Installed By 1. <input type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC 3. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 4. <input checked="" type="checkbox"/> PROPERTY OWNER LICENSE # _____

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District OR 1 HOOK UP: to an existing subsurface wastewater disposal system OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures OR <input type="checkbox"/> TRANSFER FEE (\$10.00)		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
		Urinal		Sink
		Drinking Fountain		Wash Basin
		Indirect Waste		Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
		40.00		Fixtures (Subtotal) Column 2
		40.00		Total Fixtures
				Fixture Fee
				Transfer Fee
		40.00		Hook-Up & Relocation Fee
		40.00		Permit Fee
				(Total)