

# FRANKFORT PLUMBING APPLICATION

<b>Frankfort Address</b>	<b>Caution: Permit Required</b>
Street name & #*,	Subdivision, Lot #
<b>PROPERTY OWNERS NAME</b>	
Last, first:	Plumbing shall not be installed until a Permit is attached here by the LPI.
Mailing Address	The Permit shall authorize the owner or installer to install the plumbing in accordance with this application and the Maine Plumbing Rules.
<b>OWNER/APPLICANT STATEMENT</b>	<b>Caution Inspection Required</b>
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 Inspectors to deny a Permit.  _____	I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules. I confirm the E 9 1 1 Street number, geographic identifier complies with the Addressing Ordinance.  _____
Signature of Owner/Applicant Date	Signature of Plumbing Inspector Date
*This must include the E 9 1 1 Street number, geographic identifier	

This application is for:	Type of Structure To Be Served	Plumbing to Be Installed By:
1. <input type="checkbox"/> New Plumbing 2. <input type="checkbox"/> Relocated Plumbing	1. <input type="checkbox"/> Single Family dwelling 2. <input type="checkbox"/> Modular or Mobile Homes 3. <input type="checkbox"/> Multiple Family Dwelling 4. <input type="checkbox"/> Other specify _____	1. <input type="checkbox"/> Master Plumber License # ( / / / / / ) 2. <input type="checkbox"/> Oil Burner Installer 3. <input type="checkbox"/> MFG'D Housing Dealer/Mechanic 4. <input type="checkbox"/> Public Utility Employee 5. <input type="checkbox"/> Property Owner
Hookup & Piping Relocation Max of 1 hookup	Number Column 2 ( <b>two</b> ) Type of Fixture	Number Column 1 ( <b>one</b> ) Type of Fixture
<b>   HOOKUP: Frankfort public sewer</b>	<b>Hosebibb?Sillcock</b>	<b>Bathtub (and Shower)</b>
	Floor Drain	Shower (Separate)
<b>   HOOKUP: to existing subsurface system.</b>	Urinal	Sink
	Drinking fountain	Wash Basin
<b>   Piping Relocation: without new fixtures.</b>	Indirect Waste	Water Closet (Toilet)
	Waste Treatment Softener, filter, etc.	Clothes Washer
<b>   Other Specify _____</b>	Grease/Oil Separator	Dish Washer
	Dental Cuspidor	Garbage disposal
	Bidet	Laundry Tub
<b>OR</b>	Other: _____	Water Heater
	<---Fixtures (Subtotal) Column 2 <--->	<--- Fixtures (Subtotal) Column 1 one
	→	<--- Fixtures (Subtotal) Column 2 two

<b>HOOKUP: Frankfort public sewer</b>		<b>Hosebibb?Sillcock</b>		<b>Bathtub (and Shower)</b>
				<--- Total Fixtures
				<--- Fixture Fee
_____ Transfer Fee (\$6.00)		<b>SEE PERMIT FEE SCHEDULE</b>		<--- Transfer Fee
		<b>FOR CALCULATING FEE</b>		<--- Hookup & Relocation Fee
				<--- Total Permit Fee