



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 45 Eastern Prom<sup>Unit</sup> 2B

CBL: \_\_\_\_\_

## PROPERTY OWNER(S) NAME

OWNER NAME: Sigrunn Omark

Applicant Name: Carlo Doria

Mailing Address of Owner/Applicant (if Different): 23 Waterhouse Rd Cape Elizabeth, ME 04106

E Mail: \_\_\_\_\_

### 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.

Carlo Doria  
Signature of Owner/Applicant Date \_\_\_\_\_

Town/City **PORTLAND** Permit # 2016-08016

Date Permit Issued 9/23/16 Fee: \$ 50.00 Double Fee Charged

Local Plumbing Inspector Signature: [Signature] L.P.I. # 1081

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 (Final) \_\_\_\_\_

## PERMIT INFORMATION

This Application is for  
1.  NEW PLUMBING  
2.  RELOCATED PLUMBING

RECEIVED  
SEP 22 2016  
Dept. of Building Inspections  
City of Portland Maine

Type of Structure to be Served  
1.  SINGLE FAMILY RESIDENCE  
2.  MODULAR OR MOBILE HOME  
3.  MULTIPLE FAMILY DWELLING  
4.  OTHER-SPECIFY \_\_\_\_\_

**Please call 874-8703 with your permit # to schedule inspections!**

Plumbing to be Installed by:  
NAME: Carlo Doria P+H  
1.  MASTER PLUMBER  
2.  OIL BURNERMAN  
3.  MFG'D HOUSING DEALER / MECHANIC  
4.  PUBLIC UTILITY EMPLOYEE  
5.  PROPERTY OWNER  
LICENSE # 121517116711111

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"/> Hosebib / Sillcock	<input type="checkbox"/> Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Urinal	<input type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> Water Closet (Toilet)
	<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"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
<b>OR</b>	<b>Fixtures (Subtotal) Column 2</b>	<b>Fixtures (Subtotal) Column 1</b>
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input checked="" type="checkbox"/> <b>TOTAL FIXTURES</b>
		<u>100.00</u> Fixture Fee <u>100.00</u> Transfer Fee - Surcharge
		<input type="checkbox"/> Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<u>50.00</u> PERMIT FEE (TOTAL)