



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	94 BECKETT ST
CBL:	
PROPERTY OWNER(S) NAME	
OWNER NAME:	ROB LEVIN
Applicant Name:	RAFAEL KEILT-FREYRE
Mailing Address of Owner/Applicant (if Different)	19 TENNY HILL RD RAYMOND ME 04071
E Mail:	RAFAEL.207@ICLOUD.COM
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 of Owner/Applicant	Date 2/2/18

Town/City PORTLAND Permit # 2018-07041

Date Permit Issued 2/2/18 Fee: \$ 50.00 Double Fee Charged

L.P.I. # 1081

Local Plumbing Inspector Signature _____

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 2/2/18 (Final)

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED</p> <p>FEB 02 2018</p> <p>Dept. of Building Inspections City of Portland, ME</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p>Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: RAFAEL KEILT-FREYRE</p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # MS 90014622</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<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"/> 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 checked="" type="checkbox"/>	Water Heater
	<input type="checkbox"/>	Fixtures (Subtotal) Column 2	<input type="checkbox"/>	Fixtures (Subtotal) Column 1
			<input type="checkbox"/>	TOTAL FIXTURES
		Fees:	<input type="checkbox"/>	Fixture Fee
<input type="checkbox"/> TRANSFER FEE \$10.00		\$10 Surcharge + First 4 fixtures = \$50 Minimum	<input type="checkbox"/>	Transfer Fee
		Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/>	Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! \$50.00 PERMIT FEE (TOTAL)

BP 2018-00074