



# PLUMBING PERMIT APPLICATION

**PROPERTY ADDRESS**  
 Street: 127 Cumberland Ave  
 CBL: 013 DOIS

**PROPERTY OWNER(S) NAME**  
 OWNER NAME: Ryan Myles  
 Applicant Name: Phil Snyder

Mailing Address of Owner/Applicant (if Different)  
 E Mail: Snyd5684@gmail.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: *[Signature]* Date: 7-1-16

Town/City PORTLAND Permit # 2016 01757  
 Date Permit Issued: 7/1/16 Fee: \$170 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**  
 JUL 01 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: Philip Snyder  
 1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG'D HOUSING DEALER / MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 5.  PROPERTY OWNER  
 LICENSE # MS 8476

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 checked="" type="checkbox"/> 3	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/> 1	Shower (separate)
	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/> 4	Sink
	<input type="checkbox"/>	Drinking Fountain	<input checked="" type="checkbox"/> 4	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/> 4	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 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		<b>TOTAL FIXTURES</b>	
			Fixture Fee Transfer Fee	
			Hook-Up & Relocation Fee	

**Please call 874-8703 with your permit # to schedule inspections!** 170 — PERMIT FEE (TOTAL)