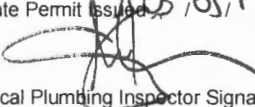




PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Town/City PORTLAND		Permit # 2015 00383
Street: 40 Quebec St		Date Permit Issued: 03/05/15		Fee: \$ 50 Double Fee Charged []
CBL: 014 H003				L.P.I. # 360
PROPERTY OWNER(S) NAME				
NAME: Mary Larochelle		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.		
Applicant Name: Pine State Services, Samuel Marcisso				
Mailing Address of Owner/Applicant (if Different) 184 Main Street, Suite 1C South Portland, ME 04106				
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 _____		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) _____ Date Approved (Rough-in) _____		

PERMIT INFORMATION		
This Application is for 1 <input type="checkbox"/> NEW PLUMBING 2 <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1 <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2 <input type="checkbox"/> MODULAR OR MOBILE HOME 3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4 <input type="checkbox"/> OTHER-SPECIFY <u>not sure</u>	Plumbing to be Installed by: NAME: Samuel Marcisso 1 <input checked="" type="checkbox"/> MASTER PLUMBER 2 <input type="checkbox"/> OIL BURNERMAN 3 <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5 <input type="checkbox"/> PROPERTY OWNER LICENSE # MS2501
Hook-Up & Piping Relocation Maximum of 1 Hook-Up <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"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR <input checked="" type="checkbox"/> TRANSFER FEE [\$10.00]	Column 2 Number Type of Fixture <input type="checkbox"/> Hosebib / Sillcock <input type="checkbox"/> Floor Drain <input type="checkbox"/> Urinal <input type="checkbox"/> Drinking Fountain <input type="checkbox"/> Indirect Waste <input type="checkbox"/> Water Treatment Softener, Filter, Etc. <input type="checkbox"/> Grease / Oil Separator <input type="checkbox"/> Roof Drain <input type="checkbox"/> Bidet <input type="checkbox"/> Other: _____ Fixtures (Subtotal) Column 2	Column 1 Number Type of Fixture <input type="checkbox"/> Bathtub (and Shower) <input type="checkbox"/> Shower (separate) <input type="checkbox"/> Sink <input type="checkbox"/> Wash Basin <input type="checkbox"/> Water Closet (Toilet) <input type="checkbox"/> Clothes Washer <input type="checkbox"/> Dish Washer <input type="checkbox"/> Garbage Disposal <input type="checkbox"/> Laundry Tub <input type="checkbox"/> Water Heater Fixtures (Subtotal) Column 1 TOTAL FIXTURES
	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge Fixtures (Subtotal) Column 2 40 Fixtures (Subtotal) Column 1 10 Hook-Up & Relocation Fee _____ PERMIT FEE (TOTAL) \$50	
Please call 874-8703 with your permit # to schedule inspections!		