

PLUMBING APPLICATION

Department of Health and Human Services
Division of Environmental Health

PROPERTY ADDRESS

| | |
|--------------------|-----------------|
| Town or Plantation | Portland |
| Street | 129 Morning St. |
| Subdivision Lot # | 129 Morning St. |

PROPERTY OWNERS NAME

| | | | |
|---|----------|----------------|----------|
| Last: | Grondall | First: | Grondall |
| Applicant Name: | | Louis Fournier | |
| Mailing Address of Owner/Applicant (If Different) | | 85 Oakdale St | |

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 Inspectors 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.

Local Plumbing Inspector Signature

Date Approved

PERMIT INFORMATION

This Application is for

1. ☒ NEW PLUMBING
2. ☒ RELOCATED PLUMBING

Type of Structure To Be Served:

1. ☐ SINGLE FAMILY DWELLING
2. ☐ MODULAR OR MOBILE HOME
3. ☒ MULTIPLE FAMILY DWELLING
4. ☐ OTHER - SPECIFY

Plumbing To Be Installed By:

1. ☒ MASTER PLUMBER
2. ☐ OIL BURNERMAN
3. ☐ MFG'D. HOUSING DEALER/MECHANIC
4. ☐ PUBLIC UTILITY EMPLOYEE
5. ☐ PROPERTY OWNER

LICENSE # 8995

| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | | Number | Column 2 Type of Fixture | Number | Column 1 Type of Fixture |
|---|---|--------|--|--------|---------------------------------|
| <input type="checkbox"/> | HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. | | Hosebib / Sillcock | | Bathtub (and Shower) |
| <input type="checkbox"/> | OR | | Floor Drain | 0,3 | Shower (Separate) |
| <input type="checkbox"/> | HOOK-UP: to an existing subsurface wastewater disposal system. | | Urinal | 0,3 | Sink |
| <input type="checkbox"/> | OR | | Drinking Fountain | 0,3 | Wash Basin |
| <input type="checkbox"/> | PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | | Indirect Waste | 0,3 | Water Closet (Toilet) |
| | | | Water Treatment Softener, Filter, etc. | | Clothes Washer |
| | | | Grease / Oil Separator | | Dish Washer |
| | | | Roof Drain | | Garbage Disposal |
| | | | Bidet | | Laundry Tub |
| | | | Other: | 0,0 | Water Heater |
| | | | Fixtures (Subtotal) Column 2 | 1,2 | Fixtures (Subtotal) Column 1 |
| | | | | 0,0 | Fixtures (Subtotal) Column 2 |
| | | | | 1,2 | Total Fixtures |
| | | | | | Fixture Fee |
| | | | | | Transfer Fee |
| | | | | | Hook-Up & Relocation Fee |
| | | | | | Permit Fee (Total) |

SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE

CITY OF PORTLAND
Fire Department
380 Congress Street
Portland, Maine 041010033

Fire Inspection Violations Listing

| | | | | |
|----------------------------------|--|-----------------|--------------------|--------------------|
| Business Name/Owner/Mgr/Location | | Inspector | BENJAMIN A WALLACE | Inspection Date |
| POINER CAPITOL | | Shift: | 005 Unit: C41 | 12/8/2009 |
| SCOTT LEMERE | | Building Number | CBL 013 1027901 | Inspection Type |
| 0085 CUMBERLAND AVE | | 47840-0-0 | 013 1027901 | ROUTINE INSPECTION |

| # | Type | Location | Notification Date | Target Compliance Date |
|---|---------------------------------|--|-------------------|------------------------|
| 1 | NUMBER OF MEANS OF EGRESS | FOURTH FLOOR IS ILLEGAL DWELLING UNIT WITH SINGLE MEANS OF EGRESS | 12/8/2009 | 1/9/2010 |
| 2 | DETECTION/ ALARM SYSTEMS | SMOKE ALARMS NON-FUNCTIONING & BATTERY MISSING. | 12/8/2009 | 1/9/2010 |
| 3 | DETECTION/ ALARM SYSTEMS | NO CARBON MONOXIDE DETECTORS IN DWELLING UNITS. | 12/8/2009 | 1/9/2010 |
| 4 | PROTECTION OF VERTICAL OPENINGS | 60-MIN FIRE DOOR ASSEMBLIES REQUIRED BETWEEN STAIRS AND UNIT'S BASEMENT. | 12/8/2009 | 1/9/2010 |
| 5 | PROTECTION OF VERTICAL OPENINGS | FIRE DOOR ASSEMBLIES SHALL BE SELF-CLOSING. | 12/8/2009 | 1/9/2010 |
| 6 | DETECTION/ ALARM SYSTEMS | BUILDINGS OVER 3 STORIES ABOVE GRADE REQUIRE A COMMERCIAL FIRE ALARM SYSTEM. | 12/8/2009 | 1/9/2010 |
| 7 | UTILITIES | UNPROTECTED JUNCTION BOXES, COVERS, WIRES. CERTIFY ELECTRICAL SYSTEM. | 12/8/2009 | 1/9/2010 |