



BP 2017-07429

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	166 Cumberland Ave
CBL:	021 E002 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Don Haley
Applicant Name:	Scott Brown
Mailing Address of Owner/Applicant (if Different)	26 Mountain Ave. So. Portland
E Mail:	Sbrown_dizi@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	Date
<i>Scott Brown</i>	6-30-17

Town/City **PORTLAND** Permit # 2017-07429

Date Permit Issued 11/27/17 Fee: \$ 140.00 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 (Final) 11/30/2017

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED</p> <p>NOV 29 2017</p> <p>Permitting & Inspections City of Portland Maine</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 type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Restaurant</u></p> <p>Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Scott Brown</u></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 # <u>MS 08152</u></p>
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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 checked="" type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input checked="" type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input checked="" type="checkbox"/> Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> Clothes Washer
	<input checked="" 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
	101 Fixtures (Subtotal) Column 2	112 Fixtures (Subtotal) Column 1
		1131 TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<u>130.00</u> Fixture Fee <u>10.00</u> Transfer Fee <i>Surcharge Fee</i>
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		<u>140.00</u> PERMIT FEE (TOTAL)