



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 2 Somerset St 160 Fox

CBL: 024 0001

PROPERTY OWNER(S) NAME

NAME: Whole Foods

Applicant Name: Caizzo Plumbing

Mailing Address of Owner/Applicant (if Different): 17 Burnham Rd Scarborough, ME 04074

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: 8/8/14

Town/City: PORTLAND Permit #: 2014 0171

Date Permit Issued: 8/8/14 Fee: \$ 50 Double Fee Charged []

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360

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.

Date Approved (Rough-in): _____

LPI Signature: _____ Date Approved (Final): _____

PERMIT INFORMATION

This Application is for
 1 NEW PLUMBING
 2 RELOCATED PLUMBING

Type of Structure to be Served
 1 SINGLE FAMILY RESIDENCE
 2 MODULAR OR MOBILE HOME
 3 MULTIPLE FAMILY DWELLING
 4 OTHER-SPECIFY Comm.

Plumbing to be installed by:
 NAME: Steve Caizzo

Please call 874-8703 with your permit # to schedule inspections!

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

LICENSE # M 57844

Hook-Up & Piping Relocation
 Maximum of 1 Hook-Up
 HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

HOOK-UP: to an existing subsurface wastewater disposal system

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE (\$10.00)

Number	Column 2 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: _____
<input type="checkbox"/>	Fixtures (Subtotal) Column 2

Fees by fixture:
 First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge

Number	Column 1 Type of Fixture
<input type="checkbox"/>	Bathtub (and Shower)
<input type="checkbox"/>	Shower (separate)
<input checked="" 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
<input type="checkbox"/>	Fixtures (Subtotal) Column 1

TOTAL FIXTURES

 Fixture Fee

 Transfer Fee

 Hook-Up & Relocation Fee

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PERMIT FEE (TOTAL)