



# 11150

# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	251 Cumberland Ave
CBL:	Portland
PROPERTY OWNER(S) NAME	
NAME:	Jay Kendiegh
Applicant Name:	Gary Turner
Mailing Address of Owner/Applicant (if Different)	467 Greeley Rd Ext. Cumberland Me 04021
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 11/28/12

Town/City PORTLAND Permit # 2012 50631  
 Date Permit Issued 11/29/12 Fee: \$ 50 Double Fee Charged [ ]  
 Local Plumbing Inspector 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

<input checked="" type="checkbox"/> This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING  <b>RECEIVED</b> <b>NOV 29 2012</b> Dept. of Building Inspections City of Portland Maine	<b>Type of Structure to be Served</b> 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____  <b>Please call 874-8703 with your permit # to schedule inspections!</b>	<b>Plumbing to be Installed by:</b> NAME: <u>Gary Turner</u> 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 # <u>2491</u>
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	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"/> 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 type="checkbox"/> TRANSFER FEE [\$10.00]	<input type="checkbox"/>	Hosebib / Silcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input checked="" 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"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2		<input type="checkbox"/> Fixtures (Subtotal) Column 1	
			<input checked="" type="checkbox"/> TOTAL FIXTURES	
	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		<input type="checkbox"/> Fixture Fee	
			<input type="checkbox"/> Transfer Fee	
			<input type="checkbox"/> Hook-Up & Relocation Fee	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<u>50</u>		<b>PERMIT FEE (TOTAL)</b>