



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 28 Monument Square 2nd Floor

CBL: 027 F002

PROPERTY OWNER(S) NAME

NAME: Kupcakes Inc. (Amy Howard)

Applicant Name: Robert E. Pothong, Jr

Mailing Address of Owner/Applicant (if Different): LYMAN ME. 04002 285 Goodwin's Mills Rd

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: 7-15-14

Town/City: PORTLAND Permit #: 201401548

Date Permit Issued: 2/15/14 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:
 NEW PLUMBING
 RELOCATED PLUMBING

RECEIVED
JUL 15 2014
 Dept. of Building Inspections
 City of Portland Maine

Type of Structure to be Served:
 SINGLE FAMILY RESIDENCE
 MODULAR OR MOBILE HOME
 MULTIPLE FAMILY DWELLING
 OTHER-SPECIFY MARKET HOME

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

Plumbing to be Installed by:
 NAME: ROBERT E. POTHONG, JR

MASTER PLUMBER
 OIL BURNERMAN
 MFG'D HOUSING DEALER / MECHANIC
 PUBLIC UTILITY EMPLOYEE
 PROPERTY OWNER

LICENSE # 111519101012131615161

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	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"/>	Hosebib / Sillcock	<input type="checkbox"/>	Bathtub (and Shower)	
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)	
	<input type="checkbox"/>	Urinal	<input checked="" type="checkbox"/>	Sink <u>(1 Three Bay - 1 Hand Sink)</u>	
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin	
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)	
	<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input 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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<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	
OR			<input type="checkbox"/>	TOTAL FIXTURES	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	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	

Please call 874-8703 with your permit # to schedule inspections! PERMIT FEE (TOTAL): _____