



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	47 Middle St
CBL:	028-PO-21001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Malone
Applicant Name:	Carlo Doria
Mailing Address of Owner/Applicant (if Different)	23 Waterhouse Rd
E Mail:	
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: 2/3

Town/City	PORTLAND	Permit #	2015-00175
Date Permit Issued	2/03/15	Fee: \$	50.00
Local Plumbing Inspector Signature		L.P.I. # 360	
<p>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.</p>			
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)	

PERMIT INFORMATION

<p>This Application is for</p> <p>1 <input type="checkbox"/> NEW PLUMBING</p> <p>2 <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED</p> <p style="text-align: center;">FEB 03 2015</p> <p style="text-align: center;">Dept. of Building 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 style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Carlo Doria P.E.</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 107167</u></p>
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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"/>	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 type="checkbox"/>	Wash Basin
	<input checked="" type="checkbox"/>	Indirect Waste	<input 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
	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 1
			<input checked="" 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 checked="" type="checkbox"/>	Fixture Fee
			<input checked="" type="checkbox"/>	Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee
			<input checked="" type="checkbox"/>	PERMIT FEE (TOTAL)

Please call 874-8703 with your permit # to schedule inspections! \$50.00

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
 389 Congress Street
 Portland, Maine 04101

PLUMBING PERMIT RECEIPT

Application No: 2015-00175	Applicant: SCARCROW HOLDINGS LLC
Project Desc:	Location: 47 MIDDLE ST
CBL: 028 P021001	Plumber: CARLO DORIA
Invoice Date: 02/03/2015	License #: MS7167

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	-	Total Due		Payment Due Date
\$0.00		\$0.00		\$50.00		\$50.00		\$0.00		On Receipt

Previous Balance **\$0.00**

Fee Description	Qty	Fee
Minimum Fee	1	\$40.00
Surcharge	1	\$10.00
Sink	1	\$10.00
Indirect Waste	1	\$10.00
Grease / Oil Separator	1	\$10.00
		\$50.00

Total Current Payments: **\$50.00**

Minimum Amount Due Now: **\$0.00**

CBL: 028 P021001	Application No: 2015-00175	Invoice Date: 02/03/2015
Bill to: SCARCROW HOLDINGS LLC		Invoice No: 47946
30 HIGHLAND ST		Total Amt Due: \$0.00
PORTLAND, ME 04103		Payment Amount: \$50.00

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.