

## PLUMBING PERMIT APPLICATION

| PROPERTY ADDR   | RESS                                  |  |   |          |
|---|---------------------------------------|--|---|----------|
| Street: 209 Fore Street   |                                       | Town/City PORTLAND   | Permit # 2015 0091                                |          |
| CBL: OR9 LOOI UDH   |                                       | Date Permit Isqued 1.50 Fee: \$ 200 Double Fee Charged [ ]   |   |          |
| OWNER NAME:   |                                       | Local Plumbing Inspector Sig   | L.P.I. # 360                                      |          |
| Applicant Name:   |                                       | The Internal Plumbing Fixture  | es and Piping shall not be installed until a Perm | nit is   |
| Mailing Address of<br>Owner/Applicant<br>(if Different)   |                                       | issued by the Local Plumbing Inspector. The Permit shall authorize the owner or<br>installer to install the plumbing system in accordance with this application and the<br>Maine Subsurface Wastewater Disposal Rules. |   |          |
| E Mail:<br>Owner/Applicant Statement  |                                       | Caution: Inspection Required   |   |          |
|   |                                       | I have inspected the installation authorized above and found it to be in compliance  |   |          |
| 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. |                                       |  | aine Plumbing Rules Application.                  | liance   |
| Signature of Owner/Applicant  | Date                                  | LPI Signature  | Date Approved<br>(Final)                          |          |
|   | PERMIT I                              | NFORMATION   |   |          |
| This Application is for   | Type of Structure to be Served        |  | Plumbing to be Installed by                       |          |
|   |                                       |  |   |          |
|   | 1SINGLE FAMILY RESIDENCE              |  | NAME: Steven Beaulie                              | <u>u</u> |
| 2RELOCATED PLUMBING   | 2 MODULAR OR MOBILE HOME              |  |   |          |
| WED   | 3 MULTIPLE FAMILY DWELLING            |  | 2 OIL BURNERMAN                                   |          |
| APR 30 2015   |                                       |  | 3 MFG'D HOUSING DEALER / MECH                     | ANIC     |
| 2 30 Lot sectio   | THER-SPECIFY                          |  |   |          |
| APK unsprain  | Please call 874-8703 with your        |  |   |          |
| of Buildintland   | permit # to schedule inspections!     |  | 5 PROPERTY OWNER                                  |          |
| RECE. <b>APR 30 2015</b><br>APR 30 2015<br>Dept of Building Inspectic<br>Dept of Building Inspectic   |                                       |  | LICENSE # 19 10017 111                            |          |
| Hook-Up & Piping Relocation<br>Maximum of 1 Hook-Up   | Co                                    | lumn 2<br>Type of Fixture  | Column 1<br>Number Type of Fixture                |          |
| HOOK-UP: to public sewer by   | Hosebib /                             |  | 03 Bathtub (and Shower)                           |          |
| those cases where the   | Floor Drain                           |  | Shower (separate)                                 |          |
| connection is not regulated and   |                                       |  | 63 Sink   |          |
| inspected by the local sanitary   | Drinking Fountain                     |  | Wash Basin  |          |
| district.   | Indirect Waste                        |  | 03 Water Closet (Toilet)                          |          |
| HOOK-UP: to an existing subsurface<br>wastewater disposal system  |                                       | atment Softener, Filter, Etc.  | Clothes Washer                                    |          |
|   |                                       | Dil Separator  | Dish Washer                                       |          |
|   | _  Roof Drain                         | n  | Garbage Disposal                                  |          |
| PIPING RELOCATION: of sanitary  | Bidet                                 |  | Laundry Tub                                       |          |
| lines, drains, and piping without new fixtures.   | Other:                                | ubtotal) Column 2  | Water Heater<br>      Fixtures (Subtotal) Colum   | n 1      |
| OR  | I I I I I I I I I I I I I I I I I I I |  | 1019 TOTAL FIXTURES                               |          |
|   | Fe                                    | es by fixture:   | Fixture Fee                                       |          |
| TRANSFER FEE [\$10.00] First 4 fixtures = \$40 Over 4 = \$10/fixtu + \$10 Surcharge   |                                       | = \$40 Over 4 = \$10/fixture   | Transfer Fee                                      |          |
|   |                                       |  | Hook-Up & Relocation F                            | ee       |
| Please call 874-8703 with your permit # to schedule inspections!  |                                       |  | PERMIT FEE (                                      | TOTAL)   |