



030 2001



IP 2014-~~7013~~ 01013
CPI 030 001001

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 66 Commercial St A
 CBL: Steve Good Rich

PROPERTY OWNER(S) NAME
 OWNER NAME: Steve Good Rich
 Applicant Name: Owen Brochu
 Mailing Address of Owner/Applicant (if Different): 143 Groe rd Alfred me
 E Mail: Owen Brochu C Brochu Plumbing

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 _____

Town/City PORTLAND Permit # 2015 00435
 Date Permit issued 3/10/15 Fee: \$ 470 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.

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
 1 NEW PLUMBING
 2 RELOCATED PLUMBING

RECEIVED
MAR 10 2015
 Dept of Building Inspections
 City of Portland Maine

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

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

Plumbing to be Installed by:
 NAME: Owen Brochu
 1 MASTER PLUMBER
 2 OIL BURNERMAN
 3 MFG'D HOUSING DEALER / MECHANIC
 4 PUBLIC UTILITY EMPLOYEE
 5 PROPERTY OWNER

LICENSE # MS900, 00646

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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"/> <u>4</u> Hosebib / Sillcock	<input type="checkbox"/> Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> <u>5</u> 1 Floor Drain	<input type="checkbox"/> Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> <u>2</u> Urinal	<input type="checkbox"/> <u>10</u> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> <u>14</u> Wash Basin
	<input type="checkbox"/> <u>4</u> Indirect Waste	<input type="checkbox"/> <u>6</u> Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> <u>3</u> 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
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!		<input type="checkbox"/> PERMIT FEE (TOTAL)