



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 136 Commercial St. - 5th Fl

CBL: 030 H004001

## PROPERTY OWNER(S) NAME

OWNER NAME: Scott Lindsay

Applicant Name: Dean Wilson

Mailing Address of Owner/Applicant (if Different): 33 N. Raymond Rd. Raymond, Me. 04071

E Mail: wilsondean20@yahoo.com

### 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.

Dean Wilson  
Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2016-08094

Date Permit Issued 11/7/16 Fee: \$ \_\_\_\_\_ Double Fee Charged

L.P.I. # 1081

Local Plumbing Inspector Signature

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.

[Signature] 11/7/16  
L.P.I. Signature Date Approved (Final)

## PERMIT INFORMATION

This Application is for

1.  NEW PLUMBING
2.  RELOCATED PLUMBING

RECEIVED

NOV 06 2016

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 \_\_\_\_\_

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

Plumbing to be Installed by:

NAME: Ron Brown P+H

1.  MASTER PLUMBER
2.  OIL BURNERMAN
3.  MFG'D HOUSING DEALER / MECHANIC
4.  PUBLIC UTILITY EMPLOYEE
5.  PROPERTY OWNER

LICENSE # 1892

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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Hosebib / Sillcock	<u>02</u>	Bathtub (and Shower)
	<u>01</u>	Floor Drain	<u>04</u>	Shower (separate)
	<input type="checkbox"/>	Urinal	<u>02</u>	Sink
	<input type="checkbox"/>	Drinking Fountain	<u>06</u>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<u>06</u>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<u>02</u>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<u>02</u>	Dish Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<u>02</u>	Water Heater
	<u>01</u>	<b>Fixtures (Subtotal) Column 2</b>	<u>26</u>	<b>Fixtures (Subtotal) Column 1</b>
			<u>27</u>	<b>TOTAL FIXTURES</b>
		Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/>	Fixture Fee
<input type="checkbox"/> TRANSFER FEE [\$10.00]			<input type="checkbox"/>	Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>			<b>PERMIT FEE (TOTAL)</b>	