



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 705 Chandler's Wharf
 CBL: 315 003075

PROPERTY OWNER(S) NAME
 OWNER NAME: Robert Scholl

Applicant Name: Kiyanoosh, Taedy

Mailing Address of Owner/Applicant (if Different): 9 Pilgrim DR Scarborough ME 04074

E Mail: pk.plumbing@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.

[Signature] 6/28/2015
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2015-01544

Date Permit Issued 6/29/15 Fee: \$ 40 Double Fee Charged []

[Signature] L.P.I. # 360
 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.

 LPI Signature Date Approved (Final)

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</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 checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</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>Kiyanoosh, Taedy</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>MS910114786</u></p>																																																																				
<p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</p> <p><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</p> <p><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> TRANSFER FEE \$[10.00]</p>	<table border="1"> <thead> <tr> <th>Number</th> <th>Column 2 Type of Fixture</th> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td><td><input type="checkbox"/></td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td><td><input type="checkbox"/></td><td>Sink</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td><td><input type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td><td><input type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td><td><input type="checkbox"/></td><td>Water Heater</td></tr> <tr><td><input type="checkbox"/></td><td>Fixtures (Subtotal) Column 2</td><td><input type="checkbox"/></td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td colspan="2" style="text-align: center;">Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture</td><td><input type="checkbox"/></td><td>TOTAL FIXTURES</td></tr> <tr><td colspan="2"></td><td><input type="checkbox"/></td><td>Fixture Fee</td></tr> <tr><td colspan="2"></td><td><input type="checkbox"/></td><td>Transfer Fee</td></tr> <tr><td colspan="2"></td><td><input type="checkbox"/></td><td>Hook-Up & Relocation Fee</td></tr> <tr><td colspan="2" style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</td><td colspan="2" style="text-align: center;">PERMIT FEE (TOTAL)</td></tr> </tbody> </table>	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture	<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 type="checkbox"/>	Sink	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	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"/>	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	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<input type="checkbox"/>	TOTAL FIXTURES			<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)		
Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture																																																																			
<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 type="checkbox"/>	Sink																																																																			
<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin																																																																			
<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	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"/>	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																																																																			
Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<input type="checkbox"/>	TOTAL FIXTURES																																																																			
		<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)																																																																				