



2015-02188
032-8010001

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 46 Market Street
 CBL: 032-8010001

PROPERTY OWNER(S) NAME
 OWNER NAME: Justin Kosberg
 Applicant Name: MICHAEL CURRIER
 Mailing Address of Owner/Applicant (if Different): P.O. BOX 434 MILTON, ME 05851
 E Mail: MILTONPUMPSHOT@hotmail.com
 Owner/Applicant Statement 201

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: [Signature] Date: 9/10/15

Town/City PORTLAND Permit # 2015-02188
 Date Permit Issued: 9/10/15 Fee: \$ 140.00 Double Fee Charged
 Local Plumbing Inspector Signature: [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

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED SEP 10 2015 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>HAIR SALON</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>MICHAEL CURRIER</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>MS3029988</u></p>
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	Column 2	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 checked="" type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. OR <input type="checkbox"/> TRANSFER FEE [\$10.00]	<input checked="" type="checkbox"/> Hosebib / Sillcock	<input checked="" type="checkbox"/> Bathtub (and Shower)
	<input checked="" type="checkbox"/> Floor Drain	<input checked="" type="checkbox"/> Shower (separate)
	<input checked="" type="checkbox"/> Urinal	<input checked="" type="checkbox"/> Sink
	<input checked="" type="checkbox"/> Drinking Fountain	<input checked="" type="checkbox"/> Wash Basin
	<input checked="" type="checkbox"/> Indirect Waste	<input checked="" type="checkbox"/> Water Closet (Toilet)
	<input checked="" type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input checked="" type="checkbox"/> Clothes Washer
	<input checked="" type="checkbox"/> Grease / Oil Separator	<input checked="" type="checkbox"/> Dish Washer
	<input checked="" type="checkbox"/> Roof Drain	<input checked="" type="checkbox"/> Garbage Disposal
	<input checked="" type="checkbox"/> Bidet	<input checked="" type="checkbox"/> Laundry Tub
	<input checked="" type="checkbox"/> 6 Other: <u>HAIR WASH SINKS</u>	<input checked="" type="checkbox"/> Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input type="checkbox"/> Fixtures (Subtotal) Column 1
		<input type="checkbox"/> TOTAL FIXTURES
	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/> Fixture Fee
		<input type="checkbox"/> Transfer Fee <u>Surcharge</u>
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		<input type="checkbox"/> PERMIT FEE (TOTAL)

140.00 PERMIT FEE (TOTAL)

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

PLUMBING PERMIT RECEIPT

Application No: 2015-02188	Applicant: MARKET MILK PARTNERS LLC
Project Desc: Thirteen (13) Plumbing Fixtures	Location: 46 MARKET ST
CBL: 032 E010001	Plumber:
Invoice Date: 09/10/2015	License #: MS307988

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$140.00		\$140.00		\$0.00	On Receipt

Previous Balance

\$0.00

Fee Description	Qty	Fee
Other	6	\$60.00
Sink	1	\$10.00
Wash Basin	1	\$10.00
Water Closet (Toilet)	1	\$10.00
Clothes Washer	1	\$10.00
Dish Washer	1	\$10.00
Laundry Tub	1	\$10.00
Water Heater	1	\$10.00
Surcharge	1	\$10.00
		\$140.00

Total Current Payments: \$140.00

Minimum Amount Due Now: \$0.00

CBL: 032 E010001 **Application No:** 2015-02188
Bill to: MARKET MILK PARTNERS LLC
 104 GRANT ST
 PORTLAND, ME 04101

Invoice Date: 09/10/2015
Invoice No: 50750
Total Amt Due: \$0.00
Payment Amount: \$140.00

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