



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 1 Dana St.

CBL: 032 4004 001

PROPERTY OWNER(S) NAME

OWNER NAME:

Applicant Name:

Mailing Address of Owner/Applicant (if Different)

E Mail: e. benner33@gmail.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 of Owner/Applicant: Eli Benner Date: 7-26-17

Town/City PORTLAND Permit # 2017-07276

Date Permit Issued 7/26/17 Fee: \$ 80.00 Double Fee Charged []

Local Plumbing Inspector Signature _____ L.P.I. # 1081

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): 7-26-2017

PERMIT INFORMATION

This Application is for

- NEW PLUMBING
- RELOCATED PLUMBING

RECEIVED
JUL 26 2017
Permitting & Inspections
City of Portland Maine

Type of Structure to be Served

- SINGLE FAMILY RESIDENCE
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER-SPECIFY Yoga Studio

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

Plumbing to be Installed by:

NAME: Eli Benner

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D HOUSING DEALER / MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # MS 90016113

| 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"/> | Hosebib/Sillcock | <input type="checkbox"/> | Bathtub (and Shower) |
| | <input type="checkbox"/> | Floor Drain | <u>01</u> | Shower (separate) |
| | <input type="checkbox"/> | Urinal | <u>03</u> | Sink |
| | <input type="checkbox"/> | Drinking Fountain | <input type="checkbox"/> | Wash Basin |
| | <input type="checkbox"/> | Indirect Waste | <u>02</u> | Water Closet (Toilet) |
| | <input type="checkbox"/> | Water Treatment Softener, Filter, etc. | <u>01</u> | Clothes Washer |
| <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system | <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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. | <input type="checkbox"/> | Other: _____ | <input type="checkbox"/> | Water Heater |
| | Fixtures (Subtotal) Column 2 | | Fixtures (Subtotal) Column 1 | |
| OR | | | <u>07</u> | TOTAL FIXTURES |
| <input type="checkbox"/> TRANSFER FEE \$[10.00] | Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture | | <u>70.00</u> | Fixture Fee |
| | | | <u>10.00</u> | Transfer Fee Surcharge |
| | | | <input type="checkbox"/> | Hook-Up & Relocation Fee |
| Please call 874-8703 with your permit # to schedule inspections! | | | <u>80.00</u> | PERMIT FEE (TOTAL) |