




PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	117 Preble Street
CBL:	033 E001001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Schlotterbeck LLC
Applicant Name:	Granite Corp
Mailing Address of Owner/Applicant (if Different)	PO Box370 Oakland, Me 04963
E Mail:	kevin@granite-corp.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.	
	May 23, 2016
Signature of Owner/Applicant	Date

Town/City	PORTLAND	Permit #	
Date Permit Issued	/ /	Fee: \$	Double Fee Charged <input type="checkbox"/>
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	Type of Structure to be Served	Plumbing to be Installed by:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ Please call 874-8703 with your permit # to schedule inspections!	NAME: Kevin A Purnell 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>MS8002</u>
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"/> 2 Hosebib / Sillcock	<input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> 2 Floor Drain	<input type="checkbox"/> 5 Shower (separate)
	<input type="checkbox"/> Urinal	<input type="checkbox"/> 5 Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> 5 Wash Basin
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> 4 Indirect Waste	<input type="checkbox"/> 5 Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> 5 Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	<input type="checkbox"/> 5 Dish Washer
	<input type="checkbox"/> 4 Roof Drain	<input type="checkbox"/> Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Bidet	<input type="checkbox"/> 1 Laundry Tub
	<input type="checkbox"/> 2 Other: _____	<input type="checkbox"/> 5 Water Heater
	1 4 Fixtures (Subtotal) Column 2	3 90 Fixtures (Subtotal) Column 1
OR		4 10 TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<input type="checkbox"/> 10 Fixture Fee <input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		4050 PERMIT FEE (TOTAL)