



# PLUMBING PERMIT APPLICATION

**PROPERTY ADDRESS**  
 Street: 23 Forest Ave.  
 CBL: 037 A022 001

**PROPERTY OWNER(S) NAME**  
 NAME: Portland Stage Co.  
 Applicant Name: Pine State Services, Samuel Marcisso  
 Mailing Address of Owner/Applicant (if Different): 184 Main Street, Suite 1C South Portland, ME 04106

**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: [Signature] Date: 2-27-17

Town/City: PORTLAND Permit # 2017-07079  
 Date Permit Issued: 2/27/17 Fee: \$ 70.00 Double Fee Charged [ ]  
 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.  
 Date Approved (Rough-in): 2/27/2017  
 LPI Signature: [Signature] Date Approved (Final): \_\_\_\_\_

## PERMIT INFORMATION

This Application is for 1 <input type="checkbox"/> NEW PLUMBING 2 <input checked="" type="checkbox"/> RELOCATED PLUMBING 3. Unitil Natural Gas Water Heater Replacement  <b>RECEIVED</b> <b>FEB 27 2017</b> Permitting & Inspections City of Portland Maine	<b>Type of Structure to be Served</b> 1 <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2 <input type="checkbox"/> MODULAR OR MOBILE HOME 3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4 <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Restaurant</u>	<b>Plumbing to be installed by:</b> NAME: <u>Samuel Marcisso</u> 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>MS2501</u>
	<b>Please call 874-8703 with your permit # to schedule inspections!</b>	

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"/> Hosebib / Sillcock	<input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<u>01</u> Sink
	<input type="checkbox"/> Drinking Fountain	<u>01</u> Wash Basin
	<u>03</u> Indirect Waste	<input type="checkbox"/> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> Clothes Washer
	<input type="checkbox"/> Grease / Oil Separator	<u>01</u> 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
	<u>03</u> Fixtures (Subtotal) Column 2	<u>03</u> Fixtures (Subtotal) Column 1
OR		<u>03</u> TOTAL FIXTURES
<input checked="" type="checkbox"/> TRANSFER FEE (\$10.00)	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	<u>160.00</u> Fixture Fee
		<u>10.00</u> Transfer Fee Surcharge
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<input type="checkbox"/> Hook-Up & Relocation Fee
		<u>70.00</u> PERMIT FEE (TOTAL)