



2015-0309
037-A03800

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 569 Congress St
 CBL: 037-A03800

PROPERTY OWNER(S) NAME
 OWNER NAME: Pachious Brothers
 Applicant Name: Stacey Ross

Mailing Address of Owner/Applicant (if Different): 17 Swett Rd. Windham, ME 04062
 E Mail: stacey.ross73@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 of Owner/Applicant: *[Signature]* Date: 12/9/2015

Town/City PORTLAND Permit # 2015-03092
 Date Permit Issued: / / Fee: \$ 5000 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

This Application is for 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING RECEIVED DEC 26 2015 Dept. of Building Inspections City of Portland Maine	Type of Structure to be Served 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>hair salon</u> Please call 874-8703 with your permit # to schedule inspections!	Plumbing to be Installed by: NAME: <u>C.W Baldwin Plumbing & H</u> 1. <input checked="" type="checkbox"/> MASTER PLUMBER <i>m Baldwin</i> 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>2387</u>
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	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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Urinal	3	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
	05	Fixtures (Subtotal) Column 2	03	Fixtures (Subtotal) Column 1
			3	TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE (\$10.00)		Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	40.00	Fixture Fee
			10.00	Transfer Fee
				Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!			50.00	PERMIT FEE (TOTAL)



Jeff Levine, AICP, Director
Planning & Urban Development Department

Tammy Munson, Director
Inspections Division

Electronic Signature and Fee Payment Confirmation

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a *legal signature* per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are *paid in full* to the Inspections Office, City of Portland Maine by method noted below:

Within 24-48 hours, upon receipt of an e-mailed invoice from Building Inspections, which signifies that my electronic permit application and corresponding paperwork have been received, determined complete, entered by an administrative representative, and assigned a permit number, I then have the following payment options:

provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment

hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall

deliver a payment method through the U.S. Postal Service, at the following address:

City of Portland, Inspections Division
389 Congress Street, Room 315
Portland, Maine 04101

Once my payment has been received, this starts the review process of my permit. I understand that after all approvals have been completed, I will then be issued my permit via e-mail. No work shall be started until I have received my permit.

Applicant Signature:

Date: 12/9/2015

I have provided digital copies and sent them on (Date: _____)

NOTE: All electronic paperwork must be delivered to buildinginspections@portlandmaine.gov or by physical means ie; a thumb drive or CD to the office.

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

PLUMBING PERMIT RECEIPT

Application No: 2015-03092	Applicant: PACHIOS BROTHERS I LLC & LA
Project Desc: Three (3) Plumbing Fixtures (Sinks)	Location: 565 CONGRESS ST
CBL: 037 A038001	Plumber: MICHAEL R. BALDWIN
Invoice Date: 12/28/2015	License #: MS2387

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$50.00		\$0.00		\$50.00	On Receipt

Previous Balance

\$0.00

Fee Description	Qty	Fee
Sink	3	\$30.00
		<u>\$30.00</u>

Total Current Payments: - \$0.00

Minimum Amount Due Now: \$30.00

CBL: 037 A038001 **Application No:** 2015-03092
Bill to: PACHIOS BROTHERS I LLC & LACONIA LLC
 167 PERRY ST 5D
 NEW YORK, NY 10014

Invoice Date: 12/28/2015
Invoice No: 52703
Total Amt Due: \$50.00
Payment Amount:

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