



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 594 Congress St 2nd Fl
 CBL:

PROPERTY OWNER(S) NAME
 OWNER NAME: Tattoo Shop (Personal use)
 Applicant Name: New Energy Solutions
 Mailing Address of Owner/Applicant (if Different): Po Box 550
Portland ME 04104
 E Mail:

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] 3/23/17
 Signature of Owner/Applicant Date

Town/City: PORTLAND Permit # 2017-07104
 PAY TO THE ORDER OF
 TD BANK NORTH B.A./MAINE Fee: \$ 50 Double Fee Charged
 Date Paid: 3-23-17
 FOR CREDIT TO THE ACCOUNT OF
CITY OF PORTLAND
 PERMITTING & INSPECTIONS DEPT. L.P.I. # 1081
 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.
 LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
 1. NEW PLUMBING
 2. RELOCATED PLUMBING
 RECEIVED
 MAR 23 2017
 Dept. of Building Inspections
 City of Portland Maine

Type of Structure to be Served
 1. SINGLE FAMILY RESIDENCE
 2. MODULAR OR MOBILE HOME
 3. MULTIPLE FAMILY DWELLING
 4. OTHER-SPECIFY Personal use
Please call 874-8703 with your permit # to schedule inspections!

Plumbing to be Installed by:
 NAME: Christopher Cote
 1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER / MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER
 LICENSE # 12793

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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<input type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input checked="" type="checkbox"/> 02 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
	<input checked="" type="checkbox"/> 02 Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> 02 Fixtures (Subtotal) Column 1
OR		<input checked="" type="checkbox"/> 02 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"/> Fixture Fee <input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! PERMIT FEE (TOTAL)