



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 502 Congress St
 CBL: 37-6-14

PROPERTY OWNER(S) NAME

NAME: Div Com
 Applicant Name: Steve Carozzo Plumbing Inc
 Mailing Address of Owner/Applicant (if Different): 17 Burnham Rd Scarborough, ME 04074
 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: 1/22/14

Town/City PORTLAND Permit # 2014-00131

Date Permit Issued 1/22/14 Fee: \$ _____ 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.

Date Approved (Rough-in) _____

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for

1 NEW PLUMBING

2 RELOCATED PLUMBING

RECEIVED
 JAN 22 2014
 Dept. of Building Inspection
 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 Commercial

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

Plumbing to be installed by:

NAME: Steve

1 MASTER PLUMBER

2 OIL BURNERMAN

3 MFG'D HOUSING DEALER / MECHANIC

4 PUBLIC UTILITY EMPLOYEE

5 PROPERTY OWNER

LICENSE # 7844

Hook-Up & Piping Relocation
 Maximum of 1 Hook-Up

HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.

HOOK-UP: to an existing subsurface wastewater disposal system

PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.

OR

TRANSFER FEE \$[10.00]

Number	Column 2 Type of Fixture
<input type="checkbox"/>	Hosebib / Sillcock
<input checked="" type="checkbox"/>	2 Floor Drain
<input type="checkbox"/>	Urinal
<input checked="" type="checkbox"/>	2 Drinking Fountain
<input type="checkbox"/>	Indirect Waste
<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.
<input type="checkbox"/>	Grease / Oil Separator
<input type="checkbox"/>	Roof Drain
<input type="checkbox"/>	Bidet
<input type="checkbox"/>	Other: _____
<input checked="" type="checkbox"/>	4 Fixtures (Subtotal) Column 2
Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	

Number	Column 1 Type of Fixture
<input type="checkbox"/>	Bathtub (and Shower)
<input checked="" type="checkbox"/>	7 Shower (separate)
<input checked="" type="checkbox"/>	1 Sink
<input checked="" type="checkbox"/>	4 Wash Basin
<input checked="" type="checkbox"/>	2 Water Closet (Toilet)
<input type="checkbox"/>	Clothes Washer
<input type="checkbox"/>	Dish Washer
<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/>	Water Heater
<input checked="" type="checkbox"/>	13 Fixtures (Subtotal) Column 1
<input checked="" type="checkbox"/>	19 TOTAL FIXTURES
<input type="checkbox"/>	Fixture Fee
<input type="checkbox"/>	Transfer Fee
<input type="checkbox"/>	Hook-Up & Relocation Fee
PERMIT FEE (TOTAL)	

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