

PLUMBING PERMIT APPLICATION

PROPERTY AL				LICATION
Street: 11. Brown	Town/City PORTLAND Permit # 2016-01043			
CBLA OOBLECK L	Date Permit Issued 4/28/16Fee: \$ 44 Double Fee Charged [ ]			
PROPERTY OWNER(S) NAME		1 A		
		Local Plumbing Inspector Signature  L.P.I. # 360		
Applicant Name: Sil, Plumbine & Hea Inc  Mailing Address of Owner/Applicant 120 thadeus St. Suites (if Different) So. Portland, ME 04106  E Mail: 5001		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.		
E Mail: SP Plum binu @ Maine, VI (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.		Caution: Inspection Required  I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.		
Signature of Owner/Applicant Date		LPI Signature		Date Approved
	PERMIT	NFORMATION		(Final)
This Application is for	ŀ			
1. NEW PLUMBING	Type of Strat		Plumbing to I	be installed by:
2.   RELOCATED CLUMBING	1. ☐ SINGLE FAMILY RESIDENCE		NAME: Stephe	W Corbeau
	2. ☐ MODULAR OR MOBILE HOME		1. D-MASTER PLUMBER	
onth ions	3.   MULTIPLE FAMILY DWELLING  4.   OTHER-SPECIFY  Please call 87448703 with your		2. OIL BURNERMAN  3. MFG'D HOUSING DEALER / MECHANIC	
Ded in out bound we waite				
duiding ha			4. PUBLIC UTILITY EMPLOYEE	
Dedro, of	permit# to sch	edule inspections!	5. PROPERTY OWNER	
Hook-Up & Piping Rejocation	VC 5 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		LICENSE # 1 2710	171111
Maximum of 1 Hook-Up	Column 2 Number Type of Fixture		Colum Number Tv	) 1 pe of Fixture
those cases where the	_   Hosebib / Sillcock		<u>    4</u>   Bathtub (and	Shower)
connection is not regulated and	Urinal		<u>_3 </u> Shower (sep    <i>4</i>   Sink	arate)
inspected by the local sanitary district.	_ _  Drinking Fountain		<u>                                     </u>	
HOOK-UP: to an existing subsurface	Indirect Waste			(Toilet)
wastewater disposal system	Water Treatment Softener, Filter, Etc.		'7  Water Closet (Toilet)    4  Clothes Washer	
	Grease / Oil S	Separator	_4  Dish Washer	
PIPING RELOCATION: of sanitary	Roof Drain		4 Garbage Disp	
lines, drains, and piping without new fixtures.	Bidet		Laundry Tub	
- January Maria	Ing without new fixtures.   Other: Other:   Othe		4  Water Heater	
OR	L 101. Multo Coupie	riai) Column 2	Fixtures (Subto	otal) Column 1
TRANSFERFEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		Fixture	
			Transfe	
Please call 874-8703 with your p	ermit # to schedule i	nspectional	Hook-Up & F サイリフ PER	Relocation Fee
			マーナツ(ノーーー 閲覧型に	11/11 3 3 3 3 3 7 7 7 7 7 7 7 8