



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
Street: 10 free street

CBL: 678-1001502

PROPERTY OWNER(S) NAME
OWNER NAME: JB Brown & Sons

Applicant Name: Robert S Dorr

Mailing Address of 17 Milliken Rd. Scarborough Me. 04074
 (if Different)

E Mail: rsdorr@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.

Robert S Dorr 9-13-15

Signature of Owner/Applicant _____ Date _____

Town/City PORTLAND **Permit #** 2015 02275

Date Permit Issued 9/21/15 **Fee:** \$ 210 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.

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for

1. NEW PLUMBING
 2. RELOCATED PLUMBING

RECEIVED
 SEP 21 2015
 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 _____

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

Plumbing to be Installed by:

NAME: Robert S Dorr

1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER / MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER

LICENSE # 08566

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.	1 Hosebib / Sillcock	1 Bathtub (and Shower)
	7 Floor Drain	1 Shower (separate)
	1 Urinal	3 Sink
	1 Drinking Fountain	6 Wash Basin
	2 Indirect Waste	3 Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	1 Water Treatment Softener, Filter, Etc.	1 Clothes Washer
	1 Grease / Oil Separator	1 Dish Washer
	1 Roof Drain	1 Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	1 Bidet	1 Laundry Tub
	1 Other: _____	1 Water Heater
OR	12 Fixtures (Subtotal) Column 2	16 Fixtures (Subtotal) Column 1
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	28 TOTAL FIXTURES
		150.00 Fixture Fee 40.00 Transfer Fee Surcharge Fee
		Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		290.00 PERMIT FEE (TOTAL)

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

PLUMBING PERMIT RECEIPT

Application No: 2015-02275	Applicant: JB BROWN & SONS
Project Desc: Plumbing for alterations	Location: 10 FREE ST
CBL: 038 A001002	Plumber: DORR, ROBERT S., JR.
Invoice Date: 09/21/2015	License #: MS90008566

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$290.00		\$290.00		\$0.00	On Receipt

Previous Balance **\$0.00**

Fee Description	Qty	Fee
Plumbing Permit Fee	1	\$280.00
Surcharge	1	\$10.00
Water Heater	1	\$10.00
Water Closet (Toilet)	3	\$30.00
Wash Basin	6	\$60.00
Urinal	1	\$10.00
Sink	3	\$30.00
Laundry Tub	1	\$10.00
Indirect Waste	2	\$20.00
Hosebibb / Sillock	1	\$10.00
Grease / Oil Separator	1	\$10.00
Floor Drain	7	\$70.00
Dish Washer	1	\$10.00
Clothes Washer	1	\$10.00
		\$290.00

Total Current Payments: - **\$290.00**

Minimum Amount Due Now: **\$0.00**

CBL: 038 A001002 **Application No:** 2015-02275
Bill to: JB BROWN & SONS
 PO BOX 207
 PORTLAND, ME 04112

Invoice Date: 09/21/2015
Invoice No: 50869
Total Amt Due: \$0.00
Payment Amount: \$290.00

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