



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 22 Free Street

CBL: 38-A-5

## PROPERTY OWNER(S) NAME

OWNER NAME: J Henry

Applicant Name: Colazzo & Son's

Mailing Address of Owner/Applicant (if Different): 700 US Rt 1 Scarborough Me 04074

E Mail: 207 831 2723

## 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

Date

7/21/15

Town/City PORTLAND

Permit # 2015-01239

Date Permit Issued 7/21/15 Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]

Local Plumbing Inspector 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

- NEW PLUMBING
- RELOCATED PLUMBING

### Type of Structure to be Served

- SINGLE FAMILY RESIDENCE
- MODULAR OR MOBILE HOME
- MULTIPLE FAMILY DWELLING
- OTHER-SPECIFY commercial

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

### Plumbing to be Installed by:

NAME: Steve

- MASTER PLUMBER
- OIL BURNERMAN
- MFG'D HOUSING DEALER / MECHANIC
- PUBLIC UTILITY EMPLOYEE
- PROPERTY OWNER

LICENSE # 7488

### 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 type="checkbox"/>            | Floor Drain                            |
| <input type="checkbox"/>            | Urinal                                 |
| <input type="checkbox"/>            | 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"/> | <b>Fixtures (Subtotal) Column 2</b>    |

### Fees:

\$10 Surcharge + First 4 fixtures = \$50 Minimum  
Over 4 = \$10 Surcharge + \$10/fixture

Number Column 1  
Type of Fixture

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input type="checkbox"/>            | Bathtub (and Shower)                |
| <input type="checkbox"/>            | Shower (separate)                   |
| <input checked="" type="checkbox"/> | Sink                                |
| <input type="checkbox"/>            | Wash Basin                          |
| <input type="checkbox"/>            | Water Closet (Toilet)               |
| <input checked="" type="checkbox"/> | Clothes Washer                      |
| <input type="checkbox"/>            | Dish Washer                         |
| <input type="checkbox"/>            | Garbage Disposal                    |
| <input type="checkbox"/>            | Laundry Tub                         |
| <input checked="" type="checkbox"/> | Water Heater                        |
| <input checked="" type="checkbox"/> | <b>Fixtures (Subtotal) Column 1</b> |

### 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!**