



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street: <u>44 Oak St</u>	
CBL: <u>039 B011 001</u>	
PROPERTY OWNER(S) NAME	
OWNER NAME: <u>Alana York</u>	
Applicant Name: <u>Craig R Albe</u>	
Mailing Address of Owner/Applicant (if Different): <u>14 Albe woods west</u> <u>Edmunds ME 04907</u>	
E Mail: <u>CraigAlbe@gmail.com</u>	
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: <u>[Signature]</u>	Date: <u>5/22/17</u>

Town/City	PORTLAND	Permit #	<u>2017-07202</u>
Date Permit Issued	<u>5/22/17</u>	Fee: \$	<u>70.00</u>
PAY TO THE ORDER OF		Double Fee Charged <input type="checkbox"/>	
TD BANK NORTH, N.A. MAINE		L.P.I. # <u>1081</u>	
FOR CREDIT TO THE ACCOUNT OF			
Local Plumbing Inspector's Signature			
PERMITTING & INSPECTIONS DEPT.			
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. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Salon</u> Please call 874-8703 with your permit # to schedule inspections!	Plumbing to be Installed by: NAME: <u>Craig R Albe</u> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>88078</u>
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"/> Floor Drain	<input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<input checked="" type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input type="checkbox"/> Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Bidet	<input checked="" type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other:	<input type="checkbox"/> Water Heater
OR	Fixtures (Subtotal) Column 2	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	TOTAL FIXTURES
		<u>160</u> - Fixture Fee
		<u>10</u> - Transfer Fee
		<u>70</u> - Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		PERMIT FEE (TOTAL)