



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Town/City PORTLAND Permit # <u>2017-07482</u>	
Street: 638 congress street		Date Permit Issued <u>12/27/17</u> Fee: \$ <u>90.00</u> Double Fee Charged <input type="checkbox"/>	
CBL: <u>045 1003 001</u>		L.P.I. # 1081	
PROPERTY OWNER(S) NAME		Local Plumbing Inspector Signature _____	
OWNER NAME: 638 congress street partner:		<p>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.</p> <hr/> <p style="text-align: center;">Caution: Inspection Required</p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> LPI Signature </div> <div style="text-align: center;"> <u>12/27/17</u> Date Approved (Final) </div> </div>	
Applicant Name: Jeff Martin			
Mailing Address of Owner/Applicant (if Different) 220 pigeon brook rd. w. Baldwin, me 04091			
E Mail: martinsph100@gmail.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.			
Jeff Martin 12/27/2017			
Signature of Owner/Applicant _____ Date _____			

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center; font-size: 1.2em; font-weight: bold;">DEC 27 2017</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input checked="" type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center; background-color: #cccccc; padding: 5px; font-weight: bold;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Jeff Martin</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>ms90009908</u></p>
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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input checked="" type="checkbox"/> 2 Floor Drain	<input type="checkbox"/> Shower (separate)
	<input checked="" type="checkbox"/> 1 Urinal	<input type="checkbox"/> Sink
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Drinking Fountain	<input checked="" type="checkbox"/> 2 Wash Basin
	<input type="checkbox"/> Indirect Waste	<input checked="" type="checkbox"/> 3 Water Closet (Toilet)
	<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"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
OR	<input checked="" type="checkbox"/> 3 Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> 5 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	<input checked="" type="checkbox"/> 8 TOTAL FIXTURES
		<input type="checkbox"/> Fixture Fee
		<input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		\$ 90.00 PERMIT FEE (TOTAL)

BP 2017-07482