



# PLUMBING PERMIT APPLICATION

| PROPERTY ADDRESS  |                               |
|---|-------------------------------|
| Street:   | 39 DEERING ST                 |
| CBL:  | 047 002 0001                  |
| PROPERTY OWNER(S) NAME  |                               |
| OWNER NAME:   | CABOT                         |
| Applicant Name:   | MAINELY PLG & HTG INC         |
| Mailing Address of Owner/Applicant (if Different)   | 674 MAIN ST, GORHAM, ME 04038 |
| E Mail:   | jim@mainelyplumbing.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. |                               |
| Signature of Owner/Applicant  | Date: 1/5/17                  |

Town/City PORTLAND Permit # 2017 07012

Date Permit Issued 2/11/17 Fee: \$ 180.00 Double Fee Charged

Local Plumbing Inspector Signature \_\_\_\_\_ L.P.I. # 1081

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

|   |  |   |
|---|--|---|
| <p><b>This Application is for</b></p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED<br/>JAN 11 2017<br/>Dept. of Building Inspections<br/>City of Portland Maine</p> | <p><b>Type of Structure to be Served</b></p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p><b>Please call 874-8703 with your permit # to schedule inspections!</b></p> | <p><b>Plumbing to be Installed by:</b></p> <p>NAME: <u>James Robinson</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 #   MS2401                    </p> |
|---|--|---|

| Hook-Up & Piping Relocation<br>Maximum of 1 Hook-Up  | Column 2<br>Number Type of Fixture  | Column 1<br>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 type="checkbox"/> Floor Drain  | <input type="checkbox"/> 3 Shower (separate)  |
| <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.  | <input type="checkbox"/> Urinal   | <input type="checkbox"/> 2 Sink   |
|  | <input type="checkbox"/> Drinking Fountain  | <input type="checkbox"/> 4 Wash Basin   |
|  | <input type="checkbox"/> Indirect Waste   | <input type="checkbox"/> 4 Water Closet (Toilet)  |
|  | <input type="checkbox"/> Water Treatment Softener, Filter, Etc.                                     | <input type="checkbox"/> 2 Clothes Washer   |
|  | <input type="checkbox"/> Grease / Oil Separator   | <input type="checkbox"/> 2 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   |
|  | <input type="checkbox"/> 0 Fixtures (Subtotal) Column 2   | <input type="checkbox"/> 17 Fixtures (Subtotal) Column 1  |
|  |   | <input type="checkbox"/> 17 TOTAL FIXTURES  |
| <input type="checkbox"/> TRANSFER FEE [\$10.00]  | Fees:<br>\$10 Surcharge + First 4 fixtures = \$50 Minimum<br>Over 4 = \$10 Surcharge + \$10/fixture | <input type="checkbox"/> 170 Fixture Fee<br><input type="checkbox"/> 10 Transfer Fee <i>surcharge</i> |
|  |   | <input type="checkbox"/> Hook-Up & Relocation Fee   |

**Please call 874-8703 with your permit # to schedule inspections!** 180.00 PERMIT FEE (TOTAL)



## Department of Permitting and Inspections

### Electronic Signature and Fee Payment Confirmation

*Notice: Your electronic signature is considered a legal signature per state law.*

By digitally signing the attached document(s), you are signifying your understanding that this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the selections below.

1. Once the complete application package has been received by us, and entered into the system
2. You will receive an e-mailed invoice from our office which signifies that your electronic permit application and corresponding paperwork have been entered, ready for payment, to begin the process.
3. You then have the following four (4) payment options:

- provide an on-line electronic check or credit/debit card (we accept American Express, Discover, VISA, and MasterCard) payment
- call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone
- hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall
- deliver a payment method through the U.S. Postal Service, at the following address:

**City of Portland  
Department of Permitting and Inspections  
389 Congress Street, Room 315  
Portland, Maine 04101**

By signing below, I understand the review process starts only once my payment has been received. After all approvals have been met and completed, I will then be issued my permit and it will be sent via e-mail. ***No work shall be started until I have received my permit.***

Applicant Signature: *James C. [Signature]* Date: 1/5/17

I have provided digital copies and sent them on: No Date: 1/5/17

NOTE: All electronic paperwork must be delivered to [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov) or by physical means ie; a thumb drive or CD to the office.

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

**PLUMBING PERMIT RECEIPT**

|   |   |
|---|---|
| <b>Application No:</b> 2017-07012                       | <b>Applicant:</b> 39 DEERING STREET LLC |
| <b>Project Desc:</b> BP 201707012 Install shower, sink, | <b>Location:</b> 39 DEERING ST          |
| <b>CBL:</b> 047 B020001                                 | <b>Plumber:</b> JAMES A. ROBINSON       |
| <b>Invoice Date:</b> 01/11/2017                         | <b>License #:</b> MS2401                |

|                         |   |                         |   |                     |   |                        |   |                  |                         |
|-------------------------|---|-------------------------|---|---------------------|---|------------------------|---|------------------|-------------------------|
| <b>Previous Balance</b> | - | <b>Payment Received</b> | + | <b>Current Fees</b> | - | <b>Current Payment</b> | = | <b>Total Due</b> | <b>Payment Due Date</b> |
| \$0.00                  |   | \$0.00                  |   | \$180.00            |   | \$180.00               |   | \$0.00           | On Receipt              |

**Previous Balance**

**\$0.00**

| <b>Fee Description</b> | <b>Qty</b> | <b>Fee</b>      |
|------------------------|------------|-----------------|
| Plumbing Permit Fee    | 1          | \$170.00        |
| Surcharge              | 1          | \$10.00         |
| Water Closet (Toilet)  | 4          | \$40.00         |
| Wash Basin             | 4          | \$40.00         |
| Sink                   | 2          | \$20.00         |
| Shower (Separate)      | 3          | \$30.00         |
| Dish Washer            | 2          | \$20.00         |
| Clothes Washer         | 2          | \$20.00         |
|                        |            | <u>\$180.00</u> |

**Total Current Payments:** - **\$180.00**

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

*pd check # 36611*

**CBL:** 047 B020001      **Application No:** 2017-07012  
**Bill to:** 39 DEERING STREET LLC  
 PO BOX 11194  
 PORTLAND, ME 04104

**Invoice Date:** 01/11/2017  
**Invoice No:** 65273  
**Total Amt Due:** \$0.00  
**Payment Amount:**

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