



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 40 Deering St.

CBL: 047 C016

PROPERTY OWNER(S) NAME

NAME: Patrick Babcock

Applicant Name: Guy N. Derosier

Mailing Address of Owner/Applicant (if Different) 27 Ray St. Biddeford ME
Owner/Applicant Statement 04005

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.

Guy N. Derosier 2/24/2014
 Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2014-00380

Date Permit Issued 02/25/2014 Fee: \$ \$50 Double Fee Charged []

Tammy Munson 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.

 Date Approved (Rough-in)
 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 SINGLE FAMILY RESIDENCE 2 MODULAR OR MOBILE HOME 3 MULTIPLE FAMILY DWELLING 4 <input checked="" type="checkbox"/> OTHER-SPECIFY _____	Plumbing to be Installed by: NAME: <u>Guy N. Derosier</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>8166</u>
---	---	--

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

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 / Silcock	<input type="checkbox"/> Bathtub (and Shower)
	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<input 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 type="checkbox"/> Laundry Tub
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater
	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1
OR		<input checked="" type="checkbox"/> TOTAL FIXTURES
TRANSFER FEE \$[10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	<u>50.00</u> Fixture Fee
		<input type="checkbox"/> Transfer Fee
		<input type="checkbox"/> Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! 60.00 PERMIT FEE (TOTAL)