



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 105 Sherman st unit 2

CBL: 048 0025

PROPERTY OWNER(S) NAME

OWNER NAME: Linda Bancroft

Applicant Name: Caiazzo & Sons Plumbing

Mailing Address of Owner/Applicant (if Different) 700 US Rt 1 units, Scarborough, ME, 04074

E Mail: Scaiazz58@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.

[Signature]
Signature of Owner/Applicant

Date 4-6-16

Town/City PORTLAND

Permit # 2016 00811

Date Permit Issued 4/6/16 Fee: \$ 50 Double Fee Charged []

[Signature]
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

RECEIVED
APR 06 2016
Dept. of Building Inspections
City of Portland Maine

Type of Structure to be Served

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

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

Plumbing to be Installed by:

NAME: Stephen Caiazzo

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

LICENSE # M 57844

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 type="checkbox"/> Floor Drain	<input checked="" type="checkbox"/> Shower (separate)
	<input type="checkbox"/> Urinal	<input checked="" type="checkbox"/> Sink
	<input type="checkbox"/> Drinking Fountain	<input checked="" type="checkbox"/> Wash Basin
	<input type="checkbox"/> Indirect Waste	<input checked="" type="checkbox"/> 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"/> 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
	Fixtures (Subtotal) Column 2	4 Fixtures (Subtotal) Column 1
OR		4 TOTAL FIXTURES
<input checked="" type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<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!

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PERMIT FEE (TOTAL)