



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 22 Bramhall

CBL:

PROPERTY OWNER(S) NAME

NAME: MAIWE MED

Applicant Name: MAT Blazewski

Mailing Address of Owner/Applicant (if Different)

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.

Mat Blazewski
Signature of Owner/Applicant Date _____

Town/City PORTLAND Permit # 201245134

Date Permit Issued 6/19/12 Fee: \$ 70 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.

I have completed this application for a permit to be installed by _____
#11908
LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
1. NEW PLUMBING
2. RELOCATED PLUMBING

RECEIVED
JUN 19 2012
Dept. of Building Inspections
City of Portland Maine

Type of Structure to be Served
1. SINGLE FAMILY RESIDENCE
2. MODULAR OR MOBILE HOME
3. MULTIPLE FAMILY DWELLING
4. OTHER-SPECIFY Hospital

Rad @ - basement

Plumbing to be Installed by:
NAME: MAT Blazewski
1. MASTER PLUMBER
2. OIL BURNERMAN
3. MFG'D HOUSING DEALER / MECHANIC
4. PUBLIC UTILITY EMPLOYEE
5. PROPERTY OWNER
LICENSE # 11219101010910815

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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 checked="" type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" 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
OR	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		TOTAL FIXTURES	
			<input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee	
			<input type="checkbox"/> Hook-Up & Relocation Fee	
	<small>MHE-211 Rev. 05/2011</small>		<u>70.00</u> PERMIT FEE (TOTAL)	