



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 17 Carleton

CBL:

## PROPERTY OWNER(S) NAME

OWNER NAME: A Vesta

Applicant Name: Damon Refrigeration Co. Inc

Mailing Address of Owner/Applicant (if Different): 840 Washington Street Auburn, ME 04212

E Mail:

### 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: Damon Refrigeration Co. Inc  
Michael A. Bove  
 Date: 12/2/16

Town/City PORTLAND Permit # 2016-05126

Date Permit Issued 12/2/16 Fee: \$ 1,680 Double Fee Charged

L.P.I. # 1081

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.

LPI Signature: [Signature] Date Approved (Final): 12/2/16

## PERMIT INFORMATION

This Application is for

- NEW PLUMBING
- RELOCATED PLUMBING

RECEIVED  
 DEC 02 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: multiple masters

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

LICENSE # 1910101147114

| 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"/> 3   5 Bathtub (and Shower)  |
| <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system   | <input type="checkbox"/> 5 Floor Drain  | <input type="checkbox"/> 2 Shower (separate)         |
| <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.  | <input type="checkbox"/> Urinal   | <input type="checkbox"/> 3   9 Sink                  |
|  | <input type="checkbox"/> Drinking Fountain  | <input type="checkbox"/> 3   8 Wash Basin            |
|  | <input type="checkbox"/> 1 Indirect Waste   | <input type="checkbox"/> 3   7 Water Closet (Toilet) |
|  | <input type="checkbox"/> Water Treatment Softener, Filter, Etc.                                     | <input type="checkbox"/> 4 Clothes Washer            |
|  | <input type="checkbox"/> Grease / Oil Separator   | <input type="checkbox"/> Dish Washer                 |
|  | <input type="checkbox"/> 3 Roof Drain   | <input type="checkbox"/> Garbage Disposal            |
|  | <input type="checkbox"/> Bidet  | <input type="checkbox"/> Laundry Tub                 |
|  | <input type="checkbox"/> 1 Other: <u>Sump Pump</u>  | <input type="checkbox"/> 2 Water Heater              |
|  | <b>10   0 Fixtures (Subtotal) Column 2</b>  | <b>10   7 Fixtures (Subtotal) Column 1</b>           |
| <b>OR</b>  |   | <b>16   7 TOTAL FIXTURES</b>                         |
| <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"/> 16   70 Fixture Fee         |
|  |   | <input type="checkbox"/> Transfer Fee                |
|  |   | <input type="checkbox"/> Hook-Up & Relocation Fee    |
| <b>Please call 874-8703 with your permit # to schedule inspections!</b>  |   | <b>1,680.00 PERMIT FEE (TOTAL)</b>                   |