

PLUMBING PERMIT APPLICATION

PROPERTY ADDR	RESS								
Street: 278 Spring Street		Town/City PORTLAND Permit #							
CBL		Date Permit Issued _ / /	Fee: \$	Double Fee Charged []					
	0) 1/1/15			LP.I.#360					
PROPERTY OWNER	Local Plumbing Inspector Signature								
NAME: Leland G. Hulst									
Applicant Name: Pine State Services, Samuel Marcisso		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							
Mailing Address of Owner/Applicant (if Different) 184 Main Street, South Portland, I	ME 04106	installer to install the plumbing	system in accor	rdance with this application and the er Disposal Rules.					
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.		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)							
					Signature of Swher/Applicant Date		LPI Signature	LPI Signature Date Approved (F	
						PERMIT	NFORMATION		
This Application is for	Type of Structure to be Served		Plum	bing to be Installed by:					
1 NEW PLUMBING	1 SINGLE FAMILY RESIDENCE 2 MODULAR OR MOBILE HOME 3 MULTIPLE FAMILY DWELLING 4 ✓ OTHER-SPECIFY not sure		1. MASTER PLUMBER 1. MASTER PLUMBER 2 OIL BURNERMAN 3 MFG'D HOUSING DEALER / MECHANIC 4 PUBLIC UTILITY EMPLOYEE						
RELOCATED PLUMBING									
_									
Please call 874-87									
		TOTAL CONTRACTOR CONTR	5. PROPE	RTY OWNER					
		medule inspections:	LICENSE # MS2501						
Hook-Up & Piping Relocation	The second of th	umn 2	Norther	Column 1					
Maximum of 1 Hook-Up I HOOK-UP: to public sewer by	Number _ Hosebib /	Type of Fixture Sillcock	Number I I Ba	Type of Fixture thtub (and Shower)					
hose cases where the connection	Floor Drain			ower (separate)					
not regulated and inspected by	Urinal		I_ _ Sin						
ne local sanitary district.	Drinking F	ountain	I_ Wa	ash Basin					
	I I Indirect W	aste	_ _ Wa	ater Closet (Toilet)					
HOOK-UP; to an existing subsurface astewater disposal system	_ Water Trea	tment Softener, Filter, Etc.	_ _ Clo	thes Washer					
,	Grease / C	Oil Separator	Dis	h Washer					
	Roof Drain	1	LL Ga	rbage Disposal					
PIPING RELOCATION: of sanitary	Bidet			undry Tub					
nes, drains, and piping without new fixtures.	Other:		The second second	ater Heater					
	_ Fixtures (S	ubtotal) Column 2		ures (Subtotal) Column 1					
OR			11	TOTAL FIXTURES					
TRANSFERFEE [\$10 00]	First 4 fixtures =	s by fixture: \$40 Over 4 = \$10/fixture 0 Surcharge	10	Fixture Fee Transfer Fee					
		- A		Hook-Up & Relocation Fee					
Please call 874-8703 with your	permit # to schedu	le inspections!	\$50	PERMIT FEE (TOTAL					