



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 110 Orchard St

CBL: 061 D015

## PROPERTY OWNER(S) NAME

OWNER NAME: ANSEL

Applicant Name: S.P. Plumbing & Heat Inc

Mailing Address of Owner/Applicant (if Different) 120 Thadeys St Suite 8 So. Portland, ME 04106

E Mail: SP.Plumbing@maine.fr.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 of Owner/Applicant [Signature] Date 11/19/15

Town/City PORTLAND Permit # 2015 02820

Date Permit Issued 11/19/15 Fee: \$ 130 Double Fee Charged [ ]

Local Plumbing Inspector Signature [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

- 1.  NEW PLUMBING
- 2.  RELOCATED PLUMBING

### Type of Structure to be Served

- 1.  SINGLE FAMILY RESIDENCE
- 2.  MODULAR OR MOBILE HOME
- 3.  MULTIPLE FAMILY DWELLING
- 4.  OTHER-SPECIFY \_\_\_\_\_

### Plumbing to be Installed by:

NAME: Stephen Corbear

- 1.  MASTER PLUMBER
- 2.  OIL BURNERMAN
- 3.  MFG'D HOUSING DEALER / MECHANIC
- 4.  PUBLIC UTILITY EMPLOYEE
- 5.  PROPERTY OWNER

LICENSE # 2709

**RECEIVED**  
**NOV 19 2015**  
Dept. of Building Inspections  
City of Portland Maine

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

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"/> / <input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/> / <input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/> / <input type="checkbox"/>	Floor Drain	<input type="checkbox"/> / <input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/> / <input type="checkbox"/>	Urinal	<input type="checkbox"/> / <input type="checkbox"/>	Sink
	<input type="checkbox"/> / <input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/> / <input type="checkbox"/>	Wash Basin
	<input type="checkbox"/> / <input type="checkbox"/>	Indirect Waste	<input type="checkbox"/> / <input type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/> / <input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> / <input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/> / <input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/> / <input type="checkbox"/>	Dish Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> / <input type="checkbox"/>	Roof Drain	<input type="checkbox"/> / <input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/> / <input type="checkbox"/>	Bidet	<input type="checkbox"/> / <input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/> / <input type="checkbox"/>	Other: _____	<input type="checkbox"/> / <input type="checkbox"/>	Water Heater
	<b>Fixtures (Subtotal) Column 2</b>		<b>Fixtures (Subtotal) Column 1</b>	
<b>OR</b>			<b>TOTAL FIXTURES</b>	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		Fixtures Fee Transfer Fee	
			Hook-Up & Relocation Fee	

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130 — PERMIT FEE (TOTAL)