



11246

PLUMBING PERMIT APPLICATION

<p style="text-align: center;">PROPER</p> <p>Street: <u>305 DANFOLTA ST</u></p> <p>CBL:</p> <p style="text-align: center;">PROPERTY OWNER(S) NAME</p> <p>NAME: <u>WAYN FLETCHER SCHOOL</u></p> <p>Applicant Name:</p> <p>Mailing Address of Owner/Applicant (if Different): <u>SPRING ST. PORTLAND, ME</u></p> <p style="text-align: center;">Owner/Applicant Statement</p> <p>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.</p> <p><u>Bentel E. Sentes</u> Date: <u>3/26/13</u></p> <p>Signature of Owner/Applicant Date</p>	<p>Town/City <u>PORTLAND</u> Permit # <u>2013 00595</u></p> <p>Date Permit Issued: <u>3/27/13</u> Fee: \$ <u>90</u> Double Fee Charged []</p> <p style="text-align: right;">L.P.I. # <u>360</u></p> <p>Local Plumbing Inspector Signature: _____</p> <p>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.</p> <p style="text-align: center;">Caution: Inspection Required</p> <p>I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.</p> <p style="text-align: right;">Date Approved (Rough-in) _____</p> <p style="text-align: center;">LPI Signature _____ Date Approved (Final) _____</p>
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PERMIT INFORMATION																																																																
<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <div style="text-align: center; border: 1px solid black; padding: 5px; transform: rotate(-15deg);"> <p>RECEIVED MAR 27 2013 Dept. of Building Inspections City of Portland Maine</p> </div>	<p style="text-align: center;">Type of Structure to be Served</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center; border: 1px solid black; padding: 2px;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p style="text-align: center;">Plumbing to be Installed by:</p> <p>NAME: <u>Bentel Sentes</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>MIS 9019121921</u></p>																																																														
<p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</p> <p><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</p> <p><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p style="text-align: center;">OR</p> <p><input type="checkbox"/> TRANSFER FEE (\$10.00)</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">Column 2</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td></tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Fixtures (Subtotal) Column 2</td> </tr> </tbody> </table> <p style="text-align: center;">Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge</p>	Column 2		Number	Type of Fixture	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 2	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">Column 1</th> </tr> <tr> <th style="text-align: center;">Number</th> <th style="text-align: center;">Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Bathub (and Shower)</td></tr> <tr><td><input type="checkbox"/></td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/></td><td>Sink</td></tr> <tr><td><input type="checkbox"/></td><td>Wash Basin</td></tr> <tr><td><input type="checkbox"/></td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/></td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/></td><td>Laundry Tub</td></tr> <tr><td><input type="checkbox"/></td><td>Water Heater</td></tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Fixtures (Subtotal) Column 1</td> </tr> <tr> <td style="text-align: center;">108</td> <td>TOTAL FIXTURES</td> </tr> <tr><td><input type="checkbox"/></td><td>Fixture Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Transfer Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Hook-Up & Relocation Fee</td></tr> <tr> <td style="text-align: center;">90</td> <td>PERMIT FEE (TOTAL)</td> </tr> </tbody> </table>	Column 1		Number	Type of Fixture	<input type="checkbox"/>	Bathub (and Shower)	<input type="checkbox"/>	Shower (separate)	<input type="checkbox"/>	Sink	<input type="checkbox"/>	Wash Basin	<input type="checkbox"/>	Water Closet (Toilet)	<input type="checkbox"/>	Clothes Washer	<input type="checkbox"/>	Dish Washer	<input type="checkbox"/>	Garbage Disposal	<input type="checkbox"/>	Laundry Tub	<input type="checkbox"/>	Water Heater	<input checked="" type="checkbox"/>	Fixtures (Subtotal) Column 1	108	TOTAL FIXTURES	<input type="checkbox"/>	Fixture Fee	<input type="checkbox"/>	Transfer Fee	<input type="checkbox"/>	Hook-Up & Relocation Fee	90	PERMIT FEE (TOTAL)
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