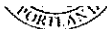


# 12065

730-2071 Scorbeau@maine.rr.com



## PLUMBING PERMIT APPLICATION

<b>PROPERTY ADDRESS</b>		Town/City <u>PORTLAND</u> Permit # <u>2013 01976</u> Date Permit Issued <u>9/4/13</u> Fee: \$ <u>50.</u> Double Fee Charged [ ] Local Plumbing Inspector Signature <u>[Signature]</u> L.P.I. # <u>360</u>	
<b>PROPERTY OWNER(S) NAME</b>		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.	
Street: <u>37 Carroll Street</u> CBL: _____		NAME: <u>Jeff Benson</u> Applicant Name: <u>S.P. Plumbing &amp; Heating, Inc.</u> Mailing Address of Owner/Applicant (if Different): <u>120 Thaddeus St. Suite 8 South Portland, ME</u> Owner/Applicant Statement <u>04106</u>	
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. <u>[Signature]</u> Date <u>9/4/13</u> Signature of Owner/Applicant      Date		<b>Caution: Inspection Required</b> I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application. Date Approved (Rough-In) _____ LPI Signature _____      Date Approved (Final) _____	
<b>PERMIT INFORMATION</b>			
This Application is for 1 <input type="checkbox"/> NEW PLUMBING 2 <input checked="" type="checkbox"/> RELOCATED PLUMBING <div style="text-align: center; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center; font-weight: bold; font-size: 1.2em;">SEP 11 2013</div> Dept. of Building Inspections City of Portland Maine		Type of Structure to be Served 1 <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2 <input type="checkbox"/> MODULAR OR MOBILE HOME 3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4 <input type="checkbox"/> OTHER-SPECIFY _____ <div style="text-align: center; border: 1px solid black; padding: 5px; font-weight: bold;">Please call 874-8703 with your permit # to schedule inspections!</div>	
Plumbing to be Installed by: NAME: <u>Stephen Corbeau</u> 1 <input checked="" type="checkbox"/> MASTER PLUMBER 2 <input type="checkbox"/> OIL BURNERMAN 3 <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4 <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5 <input type="checkbox"/> PROPERTY OWNER LICENSE # <u>2709</u>		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 type="checkbox"/> Fixtures (Subtotal) Column 2	
Column 1 Number      Type of Fixture <input type="checkbox"/> Bathtub (and Shower) <input checked="" type="checkbox"/> Shower (separate) <input type="checkbox"/> Sink <input checked="" 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 type="checkbox"/> Fixtures (Subtotal) Column 1		Column 1 Number      Type of Fixture <input type="checkbox"/> Bathtub (and Shower) <input checked="" type="checkbox"/> Shower (separate) <input type="checkbox"/> Sink <input checked="" 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 type="checkbox"/> Fixtures (Subtotal) Column 1	
Hook-Up & Piping Relocation Maximum of 1 Hook-Up <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"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures. <div style="text-align: center; font-weight: bold;">OR</div> <input type="checkbox"/> TRANSFER FEE (\$10.00)		Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge <input type="checkbox"/> Fixtures (Subtotal) Column 2 <input type="checkbox"/> Fixtures (Subtotal) Column 1 <input checked="" type="checkbox"/> TOTAL FIXTURES <input type="checkbox"/> Fixture Fee <input type="checkbox"/> Transfer Fee <input type="checkbox"/> Hook-Up & Relocation Fee	
Please call 874-8703 with your permit # to schedule inspections!		PERMIT FEE (TOTAL) <u>15424</u>	