



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 116 Pinz St.
 CBL: 062 001 001

PROPERTY OWNER(S) NAME
 OWNER NAME: Michael + Art Schell
 Applicant Name: Corey Tapley
 Mailing Address of Owner/Applicant (if Different): P.O. Box 286, Bridgton ME 04005
 E Mail: anotherplumberco@comcast.net

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: _____ Date: 8-30-16

Town/City: PORTLAND Permit #: 2016-02309
 Date Permit Issued: 8/30/16 Fee: \$ _____ Double Fee Charged
 Local Plumbing Inspector Signature: _____ L.P.I. # 1081

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

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p>RECEIVED</p> <p>AUG 30 2016</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p>Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: Corey Tapley</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 # 9101012719711</p>
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2	Column 1
	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"/>	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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Grease / Oil Separator
	<input type="checkbox"/>	Roof Drain
	<input type="checkbox"/>	Bidet
	<input type="checkbox"/>	Other: _____
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Fixtures (Subtotal) Column 2
	<input type="checkbox"/>	Fixtures (Subtotal) Column 1
OR		
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	40.00 Fixture Fee 10.00 Transfer Fee <i>Surcharge</i> _____ Hook-Up & Relocation Fee

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50.00 PERMIT FEE (TOTAL)