



# 11930

PERMIT APPLICATION

**PROPERTY ADDRESS**  
 Street: 23 Neil St  
 CBL: 06AFOOK

**PROPERTY OWNER(S) NAME**  
 NAME: Steven Byrnes  
 Applicant Name: David Small  
 Mailing Address of Owner/Applicant (if Different): 198 Gray Rd, Comb ME 04021

**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: David Small Date: 7/9/12

Town/City: PORTLAND Permit #: 2012-04-3847  
 Date Permit Issued: 7/9/12 Fee: \$ 40.00 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.  
 Date Approved (Rough-in): \_\_\_\_\_  
 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: David-Brandon  
 1.  MASTER PLUMBER  
 2.  OIL BURNERMAN  
 3.  MFG'D HOUSING DEALER / MECHANIC  
 4.  PUBLIC UTILITY EMPLOYEE  
 5.  PROPERTY OWNER  
 LICENSE # 07603

000790

RECEIVED JUL 09 2012 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"/>	Hosebib / Sillcock	<input type="checkbox"/>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input checked="" type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input checked="" type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input checked="" type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	<input type="checkbox"/> Fixtures (Subtotal) Column 2		<input type="checkbox"/> Fixtures (Subtotal) Column 1	
<b>OR</b>		<input checked="" type="checkbox"/> TOTAL FIXTURES		
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		<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)