



# PLUMBING PERMIT APPLICATION

**PROPERTY ADDRESS**

Street: 121 Neal Street

CBL:

**PROPERTY OWNER(S) NAME**

NAME: Bill Sahlman

Applicant Name: Pine State Services, Samuel Marcisso

Mailing Address of Owner/Applicant (if Different): 184 Main Street, Suite 1C South Portland, ME 04106

**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: 10/29/15

Town/City: PORTLAND Permit # \_\_\_\_\_

Date Permit Issued: / / Fee: \$ \_\_\_\_\_ Double Fee Charged [ ]

Local Plumbing Inspector 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

3. Unitil Natural Gas Water Heater Replacement

**Type of Structure to be Served**

1  SINGLE FAMILY RESIDENCE

2  MODULAR OR MOBILE HOME

3  MULTIPLE FAMILY DWELLING

4  OTHER-SPECIFY \_\_\_\_\_

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

**Plumbing to be Installed by:**

NAME: Samuel Marcisso

1  MASTER PLUMBER

2  OIL BURNERMAN

3  MFG'D HOUSING DEALER / MECHANIC

4  PUBLIC UTILITY EMPLOYEE

5  PROPERTY OWNER

LICENSE # MS2501

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	1 <input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	2 <input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	2 <input type="checkbox"/>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	1 <input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	1 <input type="checkbox"/>	Dish Washer
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
<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	
	<b>OR</b>		<b>70 TOTAL FIXTURES</b>	
<input checked="" type="checkbox"/> TRANSFER FEE \$10.00	Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge		70 Fixtures Fee	
			_____ Transfer Fee	
			_____ Hook-Up & Relocation Fee	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>			<b>70 PERMIT FEE (TOTAL)</b>	





# PORTLAND MAINE

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Jeff Levine, AICP, Director  
Director of Planning and Urban Development

Tammy Munson  
Director, Inspections Division

## **Electronic Signature and Fee Payment Confirmation**

Notice: Your electronic signature is considered a legal signature per state law.

By digitally signing the attached document(s), you are signifying your understanding this is a legal document and your electronic signature is considered a **legal signature** per Maine state law. You are also signifying your intent on paying your fees by the opportunities below.

I, the undersigned, intend and acknowledge that no permit application can be reviewed until payment of appropriate permit fees are **paid in full** to the Inspections Office, City of Portland Maine by method noted below:

- Within 24-48 hours, once my complete permit application and corresponding paperwork has been electronically delivered, I intend to **call the Inspections Office** at 207-874-8703 and speak to an administrative representative and provide a credit/debit card over the phone.
- Within 24-48 hours, once my permit application and corresponding paperwork has been electronically delivered, I intend to **hand deliver** a payment method to the Inspections Office, Room 315, Portland City Hall.
- I intend to deliver a payment method through the U.S. Postal Service mail once my permit paperwork has been electronically delivered.

Applicant Signature:

Date:

10/29/15

I have provided digital copies and sent them on

Date:

NOTE: All electronic paperwork must be delivered to [buildinginspections@portlandmaine.gov](mailto:buildinginspections@portlandmaine.gov) or by physical means ie; a thumb drive or CD to the office.