



2nd Floor

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 340 Park Ave

CBL: 065 A003 001

PROPERTY OWNER(S) NAME

OWNER NAME:

Applicant Name: Gary White

Mailing Address of Owner/Applicant (if Different): PO Box 3285
Brewster Me.
04412

E Mail:

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: Gary White Date: _____

Town/City PORTLAND Permit # 2017-07217

Date Permit Issued: 5/31/17 Fee: \$ 130⁰⁰ 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

This Application is for

- 1. NEW PLUMBING
- 2. RELOCATED PLUMBING

RECEIVED

MAY 31 2017

Dept. of Building Inspections
City of Portland Maine

Type of Structure to be Served

- 1. SINGLE FAMILY RESIDENCE
- 2. MODULAR OR MOBILE HOME
- 3. MULTIPLE FAMILY DWELLING
- 4. OTHER-SPECIFY Hotel

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

Plumbing to be Installed by:

- NAME: Gary White
- 1. MASTER PLUMBER
 - 2. OIL BURNERMAN
 - 3. MFG'D HOUSING DEALER / MECHANIC
 - 4. PUBLIC UTILITY EMPLOYEE
 - 5. PROPERTY OWNER

LICENSE # 8600

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	<u>1</u>	<u>2</u> Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater
	Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1	
			TOTAL FIXTURES	
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<u>120</u>	- Fixture Fee
			<u>10</u>	- Transfer Fee
			<input type="checkbox"/>	Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!			<u>130</u>	PERMIT FEE (TOTAL)