

PLUMBING PERMIT APPLICATION

| PROPERTY ADD | | | | | | | | | |
|--|---|---|------------------------------|--|------------------------------|--------|---------------|--|---------------|
| Street: 1019 Congress St | | Town/City PORTLAND Permit # | | | | | | | |
| CBL: | | Date Permit Issued/_ / Fee: \$Double Fee Charged [] | | | | | | | |
| PROPERTY OWNER(S) NAME | | Double Fee Charged [] | | | | | | | |
| OWNER NAME: Chris Diyan | | L.P.I. # 360 | | | | | | | |
| Applicant Name: | | Local Plumbing Inspector Signature | | | | | | | |
| Mailing Address of Owner/Applicant 91 Finn Parker Rel (if Different) Gorkam, Me 0463& E Mail: 1 Caron 1 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. | | 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. | | | | | | | |
| | | | | | Doureat Caren 6-1-15 | | | | 2 |
| | | | | | Signature of Owner/Applicant | Date _ | LPI Signature | | Date Approved |
| | | | | (Final) | | | | | |
| | PERMIT I | NFORMATION | | | | | | | |
| This Application is for | Type of Structure to be Served | | Plumbing to be Installed by: | | | | | | |
| 1 X NEW PLUMBING | 1 SINGLE FAMILY RESIDENCE | | | _ | | | | | |
| 2 RELOCATED PLUMBING | | | NAME: Laureat 1 Caron | | | | | | |
| Z | 2 MODULAR OR MOBILE HOME | | 1 1 | MASTER PLUMBER | | | | | |
| | | | 2 OIL BURNERMAN | | | | | | |
| | 3 X MULTIPLE FAMILY DWELLING | | | | | | | | |
| | Please call 874-8703 with your | | 4-8703 with your | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | permit # to sc | hedule inspections! | 5 | PROPERTY OWNER | | | | | |
| | * | | LICE | NSE # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | |
| Hook-Up & Piping Relocation Maximum of 1 Hook-Up | | ımn 2 Tupo of Fishus | | Column 1 | | | | | |
| HOOK-UP: to public sewer by | _ Hosebib / S | Type of Fixture | Numbe | JPC CIT DIGITO | | | | | |
| those cases where the | Floor Drain | | - | Bathtub (and Shower) | | | | | |
| connection is not regulated and | Urinal | | - - | Shower (separate) | | | | | |
| inspected by the local sanitary | Drinking Fo | ountain | 1 3 | The state of the s | | | | | |
| district. | I Indirect Wa | | 1 1 | Water Closet (Toilet) | | | | | |
| HOOK-UP: to an existing subsurface wastewater disposal system | | ment Softener, Filter, Etc. | | Clothes Washer | | | | | |
| wastewater disposar system | Grease / O | | | | | | | | |
| | Roof Drain | ıı ocparatul | | Dish Washer | | | | | |
| PIPING RELOCATION: of sanitary | Bidet | ` | | Garbage Disposal | | | | | |
| ines, drains, and piping without new fixtures. | Other: | 3 | | Laundry Tub | | | | | |
| 9 2 | | btotal) Column 2 | 1 41 | Water Heater | | | | | |
| OR | | any column 2 | 1 21 | Fixtures (Subtotal) Column 1 TOTAL FIXTURES | | | | | |
| | Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge | | <u> </u> | | | | | | |
| TRANSFER FEE [\$10.00] | | | | Fixture Fee Transfer Fee | | | | | |
| | + Φ10 | outcharge | | | | | | | |
| Please call 874-8703 with your permit # to schedule inspections! | | | | Hook-Up & Relocation Fee | | | | | |
| | Stille W to Schedu | ie iliahections; | | PERMIT FEE (TOTAL) | | | | | |