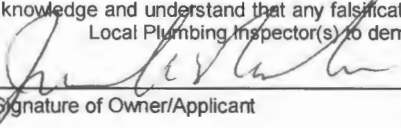
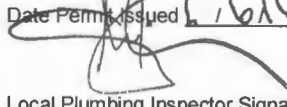




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## PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		
Street: 190 PINE ST		
CBL: 069 D012		
PROPERTY OWNER(S) NAME		
OWNER NAME: SCHARF		
Applicant Name: MAINELY PLG & HTG		
Mailing Address of Owner/Applicant (if Different) 674 MAIN ST, GORHAM, ME 04038		
E Mail: jim@mainelyplumbing.com		
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 1-04-2016		
TOWN/CITY PORTLAND Permit # 201600029		
Date Permit Issued 1/6/16 Fee: \$ 60 Double Fee Charged <input type="checkbox"/>		
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.		
LPI Signature Date Approved (Final)		
PERMIT INFORMATION		
This Application is for 1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING	Type of Structure to be Served 1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____ <b>Please call 874-8703 with your permit # to schedule inspections!</b>	Plumbing to be Installed by: <b>NAME: James Robinson</b> 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER LICENSE # MS2401
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	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"/> Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> 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"/> 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
	<b>0 Fixtures (Subtotal) Column 2</b>	<b>5 Fixtures (Subtotal) Column 1</b>
OR		<b>5 TOTAL FIXTURES</b>
<input type="checkbox"/> TRANSFER FEE [\$10.00]	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	<b>60</b> Fixture Fee Transfer Fee
		Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>60.00 PERMIT FEE (TOTAL)</b>

**CITY OF PORTLAND**  
**DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**  
389 Congress Street  
Portland, Maine 04101

**PLUMBING PERMIT RECEIPT**

<b>Application No:</b>	2016-00029	<b>Applicant:</b>	SCHARF PATRICIA
<b>Project Desc:</b>	Plumbing for alterations	<b>Location:</b>	190 PINE ST
<b>CBL:</b>	069 D012001	<b>Plumber:</b>	JAMES A. ROBINSON
<b>Invoice Date:</b>	01/06/2016	<b>License #:</b>	MS2401

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$60.00		\$60.00		\$0.00	On Receipt

**Previous Balance**

**\$0.00**

Fee Description	Qty	Fee
Plumbing Permit Fee	1	\$50.00
Surcharge	1	\$10.00
Water Closet (Toilet)	1	\$10.00
Wash Basin	1	\$10.00
Sink	1	\$10.00
Shower (Separate)	1	\$10.00
Dish Washer	1	\$10.00
		<u>\$60.00</u>

**Total Current Payments:** - **\$60.00**

**Minimum Amount Due Now:** **\$0.00**

**CBL:** 069 D012001      **Application No:** 2016-00029  
**Bill to:** SCHARF PATRICIA  
5 BEACH 222ND ST  
BREEZY POINT, NY 11697

**Invoice Date:** 01/06/2016  
**Invoice No:** 53383  
**Total Amt Due:** \$0.00  
**Payment Amount:** \$60.00

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.