



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 7 Veteran St, Peaks Island
 CBL: 85-F-37

PROPERTY OWNER(S) NAME
 OWNER NAME: Christopher Pizey
 Applicant Name: Christopher Pizey

Mailing Address of Owner/Applicant (if Different) 7 Veteran St
 Peaks Island, ME 04108
 E Mail: cpizey@gmail.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: [Signature] Date: 8/22/14

Town/City **PORTLAND** Permit # _____
 Date Permit Issued ___ / ___ / ___ Fee: \$ _____ Double Fee Charged
 L.P.I. # **360**

Local Plumbing Inspector Signature _____

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

| <p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING</p> | <p>Type of Structure to be Served</p> <p>1. <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p>Please call 874-8703 with your permit # to schedule inspections!</p> | <p>Plumbing to be Installed by:</p> <p>NAME: <u>christopher pizey</u> E Mail: <u>cpizey@gmail.com</u></p> <p>1. <input 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 checked="" type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # </p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|-----------------------------|--|--------------------|--|-------------|--|--------|--|-------------------|--|----------------|--|--|--|------------------------|--|------------|--|-------|--|--------------|--|-------------------------------------|--|--------|-----------------------------|--|----------------------|--|-------------------|--|------|--|------------|---|-----------------------|--|----------------|--|-------------|--|------------------|--|-------------|--|--------------|---|-------------------------------------|---|-----------------------|--|-------------|--|--------------|--|--------------------------|
| <p>Hook-Up & Piping Relocation Maximum of 1 Hook-Up</p> <p><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"/> HOOK-UP: to an existing subsurface wastewater disposal system <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</p> <p>OR</p> <p><input type="checkbox"/> TRANSFER FEE [\$10.00]</p> | <table border="1"> <thead> <tr> <th>Number</th> <th>Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td></td><td>Hosebib / Sillcock</td></tr> <tr><td></td><td>Floor Drain</td></tr> <tr><td></td><td>Urinal</td></tr> <tr><td></td><td>Drinking Fountain</td></tr> <tr><td></td><td>Indirect Waste</td></tr> <tr><td></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td></td><td>Grease / Oil Separator</td></tr> <tr><td></td><td>Roof Drain</td></tr> <tr><td></td><td>Bidet</td></tr> <tr><td></td><td>Other: _____</td></tr> <tr><td></td><td>Fixtures (Subtotal) Column 2</td></tr> </tbody> </table> <p>Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/per fixture</p> | Number | Column 2 Type of Fixture | | Hosebib / Sillcock | | Floor Drain | | Urinal | | Drinking Fountain | | Indirect Waste | | Water Treatment Softener, Filter, Etc. | | Grease / Oil Separator | | Roof Drain | | Bidet | | Other: _____ | | Fixtures (Subtotal) Column 2 | <table border="1"> <thead> <tr> <th>Number</th> <th>Column 1 Type of Fixture</th> </tr> </thead> <tbody> <tr><td></td><td>Bathtub (and Shower)</td></tr> <tr><td></td><td>Shower (separate)</td></tr> <tr><td></td><td>Sink</td></tr> <tr><td></td><td>Wash Basin</td></tr> <tr><td>1</td><td>Water Closet (Toilet)</td></tr> <tr><td></td><td>Clothes Washer</td></tr> <tr><td></td><td>Dish Washer</td></tr> <tr><td></td><td>Garbage Disposal</td></tr> <tr><td></td><td>Laundry Tub</td></tr> <tr><td></td><td>Water Heater</td></tr> <tr><td>1</td><td>Fixtures (Subtotal) Column 1</td></tr> <tr><td>1</td><td>TOTAL FIXTURES</td></tr> <tr><td></td><td>Fixture Fee</td></tr> <tr><td></td><td>Transfer Fee</td></tr> <tr><td></td><td>Hook-Up & Relocation Fee</td></tr> </tbody> </table> | Number | Column 1 Type of Fixture | | Bathtub (and Shower) | | Shower (separate) | | Sink | | Wash Basin | 1 | Water Closet (Toilet) | | Clothes Washer | | Dish Washer | | Garbage Disposal | | Laundry Tub | | Water Heater | 1 | Fixtures (Subtotal) Column 1 | 1 | TOTAL FIXTURES | | Fixture Fee | | Transfer Fee | | Hook-Up & Relocation Fee |
| Number | Column 2 Type of Fixture | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Hosebib / Sillcock | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Floor Drain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Urinal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Drinking Fountain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Indirect Waste | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Water Treatment Softener, Filter, Etc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Grease / Oil Separator | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Roof Drain | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Bidet | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Other: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Fixtures (Subtotal) Column 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number | Column 1 Type of Fixture | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Bathtub (and Shower) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Shower (separate) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Sink | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Wash Basin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | Water Closet (Toilet) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Clothes Washer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Dish Washer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Garbage Disposal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Laundry Tub | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Water Heater | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | Fixtures (Subtotal) Column 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | TOTAL FIXTURES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Fixture Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Transfer Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Hook-Up & Relocation Fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Please call 874-8703 with your permit # to schedule inspections!</p> | | <p>PERMIT FEE (TOTAL)</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |



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, upon receipt of an e-mailed invoice from Building Inspections, which signifies that my electronic permit application and corresponding paperwork have been received, determined complete, entered by an administrative representative, and assigned a permit number, I then have the following four (4) payment options:

- to provide an on-line electronic check or credit/debit card (we now accept American Express, Discover, VISA, and MasterCard) payment (along with applicable fees beginning July 1, 2014),
- call the Inspections Office at (207) 874-8703 and speak to an administrative representative to provide a credit/debit card payment over the phone,
- hand-deliver a payment method to the Inspections Office, Room 315, Portland City Hall,
- or deliver a payment method through the U.S. Postal Service, at the following address:

City of Portland
Inspections Division
389 Congress Street, Room 315
Portland, Maine 04101

Once my payment has been received, this then starts the review process of my permit. ***After all approvals have been met and completed, I will then be issued my permit via e-mail.*** No work shall be started until I have received my permit.

Applicant Signature: _____ Date: **8/22/14**

I have provided digital copies and sent them on: email Date: **8/22/14**

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

Room 315 - 389 Congress Street- Portland, Maine 04101 (207) 874-8703 - Fax: 874-8716 - TTY: 874-8936