



PEAKS IS.

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 8 DIAMOND PASS
 CBL: 090 8002001

PROPERTY OWNER(S) NAME
 OWNER NAME: JEAN GULLIVER
 Applicant Name: PAUL ERIC
 Mailing Address of Owner/Applicant (if Different): 50 ELIZABETH ST
 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: *Paul Eric* Date: 2-26-18

Town/City PORTLAND Permit # 2018-07084
 Date Permit Issued 2/26/18 Fee: \$ 50.00 Double Fee Charged
 L.P.I. # 1081
 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.
 Signature: *[Signature]* Date Approved (Final): 2/26/18

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING RECEIVED</p> <p>FEB 26 2018</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>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: <i>PAUL ERIC</i></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <i>1210519</i></p>
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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"/> 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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<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
OR	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/> TRANSFER FEE [\$10.00]	<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	
	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<input type="checkbox"/> Fixture Fee	
			<input type="checkbox"/> Transfer Fee	
			<input type="checkbox"/> Hook-Up & Relocation Fee	
Please call 874-8703 with your permit # to schedule inspections!		\$50.00	PERMIT FEE (TOTAL)	

BP 2017-01410