

PLUMBING APPLICATION

Department of Human Sciences
Division of Health Engineering

PROPERTY ADDRESS

Town or Plantation: PORTLAND
 Street Subdivision Lot #: 449 Forest Ave (Unit 7B)
 PROPERTY OWNERS NAME

Last: Forest Ave Plaza First: LLC
 Applicant Name: David Kirby
 Mailing Address of Owner/Applicant (If Different): 33 Lake Ln, Windham ME

Caution: Permit Required
 Plumbing shall not be installed until a Permit is attached here by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing in accordance with this application and the Maine Plumbing Rules.

*Plmg. Permit # 2015-01775
 CR # 111-4016002*

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 Inspectors to deny a Permit.

David Kirby 7/23/15
 Signature of Owner/Applicant Date

Caution: Inspection Required

I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

[Signature]
 Local Plumbing Inspector Signature Date Approved

PERMIT INFORMATION

This Application is for	Type of Structure To Be Served:	Plumbing To Be Installed By:
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING	1. <input type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER - SPECIFY <u>Shopping Center (Unit 7B)</u>	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 # <u>9084</u>

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Type of Fixture		Column 1 Type of Fixture	
	Number	Type of Fixture	Number	Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District. OR HOOK-UP: to an existing subsurface wastewater disposal system.		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain		Shower (Separate)
OR PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		Urinal		Sink
		Drinking Fountain	0, 1	Wash Basin
OR TRANSFER FEE [\$6.00]		Indirect Waste	0, 1	Water Closet (Toilet)
		Water Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
		Fixtures (Subtotal) Column 2	2	Fixtures (Subtotal) Column 1
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE				
			40.00	Fixtures Fee
			10.00	Surcharge Transfer Fee
				Hook-Up & Relocation Fee
			50.00	Permit Fee (Total)

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

PLUMBING PERMIT RECEIPT

Application No: 2015-01775	Applicant: FOREST AVENUE PLAZA LLC
Project Desc: Two (2) Plumbing Fixtures	Location: 449 FOREST AVE
CBL: 111 A016002	Plumber: DAVID W. KIRBY
Invoice Date: 07/23/2015	License #: MS90009084

Previous Balance	-	Payment Received	+	Current Fees	-	Current Payment	=	Total Due	Payment Due Date
\$0.00		\$0.00		\$50.00		\$50.00		\$0.00	On Receipt

Previous Balance **\$0.00**

Fee Description	Qty	Fee
Minimum Fee	1	\$40.00
Surcharge	1	\$10.00
Water Closet (Toilet)	1	\$10.00
Wash Basin	1	\$10.00
		<u>\$50.00</u>

Total Current Payments: **\$50.00**

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

CBL: 111 A016002 **Application No:** 2015-01775
Bill to: FOREST AVENUE PLAZA LLC
 715 BOYLSTON ST
 BOSTON, MA 02116

Invoice Date: 07/23/2015
Invoice No: 50151
Total Amt Due: \$0.00
Payment Amount:

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