



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Town/City PORTLAND Permit # 2015 00380 Date Permit Issued 0305/15 Fee: \$ 50 Double Fee Charged []	
Street: 28 Hersey Street CBL: 129 6012		Local Plumbing Inspector Signature L.P.I. # 360	
PROPERTY OWNER(S) NAME			
NAME: Kristen Tyson Applicant Name: Pine State Services, Samuel Marcisso Mailing Address of Owner/Applicant (if Different) 184 Main Street, Suite 1C South Portland, ME 04106		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. <div style="text-align: center;">Caution: Inspection Required</div> I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.	
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 _____			
Signature of LPI _____ Date Approved (Rough-in) _____ 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 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 <u>not sure</u>	Plumbing to be Installed by: NAME: <u>Samuel Marcisso</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>MS2501</u>																																					
<div style="transform: rotate(-30deg); opacity: 0.5; font-size: 1.2em;"> RECEIVED MAR 05 2015 Dept. of Building Inspections City of Portland Maine </div>																																							
Hook-Up & Piping Relocation Maximum of 1 Hook-Up <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. <div style="text-align: center;">OR</div> <input checked="" type="checkbox"/> TRANSFER FEE \$[10.00]	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Number</th> <th style="width: 80%;">Column 2 Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/></td><td>Hosebib / Sillcock</td></tr> <tr><td><input type="checkbox"/></td><td>Floor Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Urinal</td></tr> <tr><td><input type="checkbox"/></td><td>Drinking Fountain</td></tr> <tr><td><input type="checkbox"/></td><td>Indirect Waste</td></tr> <tr><td><input type="checkbox"/></td><td>Water Treatment Softener, Filter, Etc.</td></tr> <tr><td><input type="checkbox"/></td><td>Grease / Oil Separator</td></tr> <tr><td><input type="checkbox"/></td><td>Roof Drain</td></tr> <tr><td><input type="checkbox"/></td><td>Bidet</td></tr> <tr><td><input type="checkbox"/></td><td>Other: _____</td></tr> <tr> <td colspan="2">Fixtures (Subtotal) Column 2</td> </tr> </tbody> </table>			Number	Column 2 Type of Fixture	<input type="checkbox"/>	Hosebib / Sillcock	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Other: _____	Fixtures (Subtotal) Column 2													
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Please call 874-8703 with your permit # to schedule inspections!																																							