



11976

OK-CLOSE

ERMIT APPLICATION

PROPERTY ADDRESS

Street: 710 FOREST AVE

CBL:

PROPERTY OWNER(S) NAME

NAME: DELTA REALTY LLC

Applicant Name: PHIL SNYDER

Mailing Address of Owner/Applicant (if Different) P.O. Box 665 Gorham ME 04038

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: 9-4-12

Town/City PORTLAND Permit # 2012-07-4476

Date Permit Issued 9/4/12 Fee: \$ 60.0 Double Fee Charged []

Local Plumbing Inspector Signature: [Signature] L.P.I. # 360 130 6005

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 subsurface Wastewater Disposal Rules.

Caution: Inspection Required

Inspection authorized above and found it to be in compliance with the Plumbing Rules Application.

Date Approved (Rough-in)

Date Approved (Final)

CLOSED

PERMIT

This Application is for

- 1. [] NEW PLUMBING
2. [] RELOCATED PLUMBING

Type of Structure

- 1. [] SINGLE FAMILY
2. [] MODULAR
3. [] MULTIPLE FAMILY
4. [X] OTHER-SPECIFY NAIL SALON

Plumbing to be Installed by:

NAME:

- 1. [X] MASTER PLUMBER
2. [] OIL BURNERMAN
3. [] MFG'D HOUSING DEALER / MECHANIC
4. [] PUBLIC UTILITY EMPLOYEE
5. [] PROPERTY OWNER

LICENSE # MS 8476

RECEIVED SEP 04 2012

Dept. of Building Inspections City of Portland Maine

Please call 874-8703 with your permit # to schedule inspections!

Table with columns for Hook-Up & Piping Relocation, Column 2 (Type of Fixture), and Column 1 (Type of Fixture). Includes rows for various fixtures like Hosebib, Floor Drain, Urinal, etc., and a summary row for TOTAL FIXTURES.

Please call 874-8703 with your permit # to schedule inspections! PERMIT FEE (TOTAL) 70

9/26/68 MA-3
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