



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 199 Pleasant
 CBL: 132 5001 001

PROPERTY OWNER(S) NAME
 OWNER NAME:

Applicant Name: Ryan Littlefield

Mailing Address of Owner/Applicant (if Different) 175 Simpson Rd
SECA ME 04072

E Mail: ryansplumbing.heating@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 _____ Date _____

Town/City PORTLAND Permit # 2017-07158

Date Permit Issued 4/25/17 Fee: \$ _____ 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.

LPI Signature _____ Date Approved (Final) _____

PERMIT INFORMATION

This Application is for
 1. NEW PLUMBING
 2. RELOCATED PLUMBING

RECEIVED
 APR 25 2017
 Dept. of Building Inspections
 City of Portland Maine

Type of Structure to be Served
 1. SINGLE FAMILY RESIDENCE
 2. MODULAR OR MOBILE HOME
 3. MULTIPLE FAMILY DWELLING
 4. OTHER-SPECIFY _____

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

Plumbing to be Installed by:
 NAME: Ryan Littlefield
 1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER / MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER

LICENSE # M1519101/12131510

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Urinal	<input checked="" type="checkbox"/> 5 Sink
	<input type="checkbox"/> Drinking Fountain	<input type="checkbox"/> Wash Basin
	<input checked="" type="checkbox"/> 1 Indirect Waste	<input checked="" type="checkbox"/> 1 Water Closet (Toilet)
	<input type="checkbox"/> Water Treatment Softener, Filter, Etc.	<input type="checkbox"/> Clothes Washer
	<input checked="" type="checkbox"/> 1 Grease / Oil Separator	<input type="checkbox"/> Dish Washer
	<input type="checkbox"/> Roof Drain	<input type="checkbox"/> Garbage Disposal
	<input type="checkbox"/> Bidet	<input type="checkbox"/> Laundry Tub
	<input checked="" type="checkbox"/> 1 Other: <u>ICE CREAM DIPPER WELL</u>	<input type="checkbox"/> Water Heater
	<input checked="" type="checkbox"/> 3 Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> 6 Fixtures (Subtotal) Column 1
OR		<input checked="" type="checkbox"/> 9 TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE \$10.00	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!		PERMIT FEE (TOTAL)