



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	502 Stevens Ave
CBL:	135 E009 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	502 Deering Ctr LLC
Applicant Name:	Pine State Services, Inc.
Mailing Address of Owner/Applicant (if Different)	35 Eisenhower Dr. Westbrook, ME 04092
E Mail:	Jim@PineStateServices.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 7-31-17

Town/City	PORTLAND	Permit #	2017-07289
Date Permit Issued	7/31/17	Fee: \$	700 - Double Fee Charged []
Local Plumbing Inspector Signature		L.P.I. # 1081	
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

<p>This Application is for</p> <p>1. <input checked="" type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED JUL 31 2017</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 checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Samuel Massob</u></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 # <u>2501</u></p>
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	Column 2	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.	02	Hosebib/Sillcock
	08	Floor Drain
		Urinal
		Drinking Fountain
	01	Indirect Waste
		Water Treatment Softener, Filter, etc.
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		Grease / Oil Separator
		Roof Drain
		Bidet
		Other: _____
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	11	Fixtures (Subtotal) Column 2
	59	Fixtures (Subtotal) Column 1
OR		TOTAL FIXTURES
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	
Please call 874-8703 with your permit # to schedule inspections!		700 - PERMIT FEE (TOTAL)