



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 4 Bayview Terrace

CBL: 156 E009

PROPERTY OWNER(S) NAME
 NAME: Susan Cote
 Applicant Name: Pine State Services, Samuel Marcisso
 Mailing Address of Owner/Applicant (if Different): 184 Main Street, Suite 1C South Portland, ME 04106

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 # 2015 03011
 Date Permit Issued 12/15/15 Fee: \$ 50 - Double Fee Charged []
 Local Plumbing Inspector Signature _____ L.P.I. # 360

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.

_____ Date Approved (Rough-in)
 _____ LPI Signature _____ Date Approved (Final)

PERMIT INFORMATION

This Application is for
 1 NEW PLUMBING
 2 RELOCATED PLUMBING

RECEIVED
DEC 15 2015
 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 not sure

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

Plumbing to be Installed by:
 NAME: Samuel Marcisso

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

LICENSE # MS2501

Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2		Column 1	
	Number	Type of Fixture	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"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<input type="checkbox"/>	Sink
	<input type="checkbox"/>	Drinking Fountain	<input type="checkbox"/>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<input type="checkbox"/>	Water Closet (Toilet)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<input type="checkbox"/>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<input type="checkbox"/>	Dish Washer
	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	1	Water Heater
	<input type="checkbox"/>	Fixtures (Subtotal) Column 2	1	Fixtures (Subtotal) Column 1
OR			1	TOTAL FIXTURES
<input checked="" type="checkbox"/> TRANSFER FEE [\$10.00]		Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge	40	Fixture Fee
			10	Transfer Fee
				Hook-Up & Relocation Fee

Please call 874-8703 with your permit # to schedule inspections! \$50 PERMIT FEE (TOTAL)