



# 11142

A 2012 50373

# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS		Town/City	
Street:	36 Brookside Rd	PORTLAND	Permit # 2012 074565 Plumb
CBL:	PORTLAND 158 BOON	Date Permit Issued	11/19/12 Fee: \$ 150 Double Fee Charged [ ]
PROPERTY OWNER(S) NAME		Local Plumbing Inspector Signature	
NAME:	LEN FREEMAN	L.P.I. # 360	
Applicant Name:	JAMES B. SAWYER	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.	
Mailing Address of Owner/Applicant (if Different)	2 SPAN COVE RD FREETOWN, ME 04032	<b>Caution: Inspection Required</b>	
Owner/Applicant Statement		I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.	
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.		Date Approved (Rough-in)	
Signature of Owner/Applicant: <i>James Sawyer</i> Date: 11/19/12		LPI Signature: _____ Date Approved (Final)	

PERMIT INFORMATION																																																												
This Application is for	Type of Structure to be Served	Plumbing to be Installed by:																																																										
1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING  <div style="text-align: center;"> <b>RECEIVED</b>  <b>NOV 19 2012</b>              Dept. of Building Inspections              City of Portland Maine           </div>	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 _____  <div style="text-align: center; border: 1px solid black; padding: 2px;"> <b>Please call 874-8703 with your permit # to schedule inspections!</b> </div>	NAME: <u>JAMES B. SAWYER</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 #           2250																																																										
<b>Hook-Up &amp; Piping Relocation</b> 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.  OR  <input type="checkbox"/> TRANSFER FEE [\$10.00]	<table border="1"> <thead> <tr> <th>Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> 2</td><td>Hosebib / Silcock</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><input type="checkbox"/> 2</td><td><b>Fixtures (Subtotal) Column 2</b></td></tr> </tbody> </table> <p style="text-align: center;">Fees by fixture: First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge</p>	Number	Type of Fixture	<input type="checkbox"/> 2	Hosebib / Silcock	<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: _____	<input type="checkbox"/> 2	<b>Fixtures (Subtotal) Column 2</b>	<table border="1"> <thead> <tr> <th>Number</th> <th>Type of Fixture</th> </tr> </thead> <tbody> <tr><td><input type="checkbox"/> 1</td><td>Bathtub (and Shower)</td></tr> <tr><td><input type="checkbox"/> 1</td><td>Shower (separate)</td></tr> <tr><td><input type="checkbox"/> 1</td><td>Sink</td></tr> <tr><td><input type="checkbox"/> 3</td><td>Wash Basin</td></tr> <tr><td><input type="checkbox"/> 3</td><td>Water Closet (Toilet)</td></tr> <tr><td><input type="checkbox"/> 1</td><td>Clothes Washer</td></tr> <tr><td><input type="checkbox"/> 1</td><td>Dish Washer</td></tr> <tr><td><input type="checkbox"/></td><td>Garbage Disposal</td></tr> <tr><td><input type="checkbox"/> 1</td><td>Laundry Tub</td></tr> <tr><td><input type="checkbox"/></td><td>Water Heater</td></tr> <tr><td><input type="checkbox"/> 2</td><td><b>Fixtures (Subtotal) Column 1</b></td></tr> <tr><td><input type="checkbox"/> 14</td><td><b>TOTAL FIXTURES</b></td></tr> <tr><td><input type="checkbox"/></td><td>Fixture Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Transfer Fee</td></tr> <tr><td><input type="checkbox"/></td><td>Hook-Up &amp; Relocation Fee</td></tr> <tr><td><input type="checkbox"/> 150</td><td><b>PERMIT FEE (TOTAL)</b></td></tr> </tbody> </table>	Number	Type of Fixture	<input type="checkbox"/> 1	Bathtub (and Shower)	<input type="checkbox"/> 1	Shower (separate)	<input type="checkbox"/> 1	Sink	<input type="checkbox"/> 3	Wash Basin	<input type="checkbox"/> 3	Water Closet (Toilet)	<input type="checkbox"/> 1	Clothes Washer	<input type="checkbox"/> 1	Dish Washer	<input type="checkbox"/>	Garbage Disposal	<input type="checkbox"/> 1	Laundry Tub	<input type="checkbox"/>	Water Heater	<input type="checkbox"/> 2	<b>Fixtures (Subtotal) Column 1</b>	<input type="checkbox"/> 14	<b>TOTAL FIXTURES</b>	<input type="checkbox"/>	Fixture Fee	<input type="checkbox"/>	Transfer Fee	<input type="checkbox"/>	Hook-Up & Relocation Fee	<input type="checkbox"/> 150	<b>PERMIT FEE (TOTAL)</b>
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