



2015-02847
168-2015001

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 68 Inverness St
 CBL: Portland ME 04103

PROPERTY OWNER(S) NAME
 OWNER NAME: Melissa Linscott + 3 properties

Applicant Name: Angel L. Ortiz

Mailing Address of Owner/Applicant (if Different): PO Box 426 Topsham ME 04086

E Mail:

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: 11-6-15

Town/City PORTLAND Permit # 001502847
 Date Permit Issued 11/23/15 Fee: \$ 140.00 Double Fee Charged
 Local Plumbing Inspector Signature: [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.

LPI Signature: _____ Date Approved (Final): _____

PERMIT INFORMATION

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

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

Plumbing to be Installed by:
 NAME: Angel L. Ortiz
 1. MASTER PLUMBER
 2. OIL BURNERMAN
 3. MFG'D HOUSING DEALER / MECHANIC
 4. PUBLIC UTILITY EMPLOYEE
 5. PROPERTY OWNER
 LICENSE # M59,000,969,2

RECEIVED
NOV 23 2015
Dept. of Building Inspections
City of Portland Maine

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

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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<u>02</u>	Hosebib / Sillcock	<u>02</u>	Bathtub (and Shower)
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)
	<input type="checkbox"/>	Urinal	<u>01</u>	Sink
	<input type="checkbox"/>	Drinking Fountain	<u>02</u>	Wash Basin
	<input type="checkbox"/>	Indirect Waste	<u>02</u>	Water Closet (Toilet)
	<input type="checkbox"/>	Water Treatment Softener, Filter, Etc.	<u>01</u>	Clothes Washer
	<input type="checkbox"/>	Grease / Oil Separator	<u>01</u>	Dish Washer
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Roof Drain	<input type="checkbox"/>	Garbage Disposal
	<input type="checkbox"/>	Bidet	<input type="checkbox"/>	Laundry Tub
	<input type="checkbox"/>	Other: _____	<u>02</u>	Water Heater
OR	<u>02</u> Fixtures (Subtotal) Column 2		<u>11</u> Fixtures (Subtotal) Column 1	
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture		<u>13</u> TOTAL FIXTURES <u>130.00</u> Fixture Fee <u>10.00</u> Transfer Fee Surcharge Hook-Up & Relocation Fee	
Please call 874-8703 with your permit # to schedule inspections!			<u>140.00</u> PERMIT FEE (TOTAL)	