



\$50

PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS

Street: 19 JEANNE COURT

CBL:

PROPERTY OWNER(S) NAME

OWNER NAME:

Applicant Name: Mark O'Brien P & H Inc

Mailing Address of Owner/Applicant (if Different) 9 Broadmoor Dr, Cumberland Ctr, Me 04021

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.

Mark O'Brien 8-8-2017
Signature of Owner/Applicant Date

Town/City PORTLAND Permit # 2017-07304

Date Permit Issued 8/11/17 Fee: \$ 150.00 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

AUG 11 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: Mark O'Brien

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

LICENSE # 02321

| 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 / Silcock | <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"/> | 3 Wash Basin |
| | <input type="checkbox"/> | Indirect Waste | <input type="checkbox"/> | 2 Water Closet (Toilet) |
| | <input type="checkbox"/> | Water Treatment Softener, Filter, Etc. | <input type="checkbox"/> | 1 Clothes Washer |
| | <input type="checkbox"/> | Grease / Oil Separator | <input type="checkbox"/> | 1 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: _____ | <input type="checkbox"/> | Water Heater |
| Fixtures (Subtotal) Column 2 | | 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 | | <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) | |