

## PLUMBING PERMIT APPLICATION

| PROPERTYADL  | RESS   | ***   |                                    |  |
|--|--|---|------------------------------------|--|
| Street: 29<br>31 Kenilworth Street   |  | Town/City PORTLAND  | Perm                               | 14650 1106 #III                        |
| CBL: 185 F020  |  | Date Permit [ssued] / Pee: \$ 50 Double Fee Charged []  |                                    |  |
| PROPERTY OWNER(S) NAME   |  | L.P.i. # 360  |                                    |  |
| NAME: Pirun Sen Applicant Pine State Services, Samuel Marcisso Mailing Address of Owner/Applicant 184 Main Street, Suite 1C (If Different) South Portland, ME 04106 Owner/Applicant Statement  |  | The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Piumbing 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. |                                    |  |
| I certify that the information submitted is correct to the best of my knowledge and understand that any faisification is reason for the Local Plumbing Inspector(s) to deny a permit.  |  | 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)               |
| Signature of Owner/Applicant   | Date   | LPI Signature Date Approved (Final)   |                                    |  |
| This Application is for  |  | NFORMATION<br>cture to be Served  | Plu                                | imbing to be installed by:             |
| 1NEW PLUMBING  | 1  |   | !                                  | •                                      |
| 2 RELOCATED PLUMBING   | 1 SINGLE FAMILY RESIDENCE  |   | NAME: Samuel Marcisso              |  |
| EVED   | 2 MODULAR OR MOBILE HOME   |   | 1. MASTER PLUMBER                  |  |
| SECT " MA  | 3 MULTIPLE FAI   | MILY DWELLING   |                                    | BURNERMAN                              |
| RELOCATED PLUMBING  RELOCATED PLUMBING  NOV 1 4 2014  NOV 1 4 2014  NOV 1 14 2014 | 4.☑OTHER-SPECIFY not sure  |   | 3. MFG'D HOUSING DEALER / MECHANIC |  |
| Sol of English   |  |   | 4. PUBLIC UTILITY EMPLOYEE         |  |
| De. Cla  | Please call 874-8703 <u>with your</u><br>permit # to schedule inspections! |   | 5. PROPERTY OWNER                  |  |
|  |  |   | LICENSE # MS2501                   |  |
| Hook-Up & Piping Relocation Maximum of 1 Hook-Up I HOOK-UP: to public sewer by   |  | Type of Fixture   | Number                             | Column 1<br>Type of Fixture            |
| those cases where the connection   | Hosebib / S  | illcock   | _B                                 | athtub (and Shower)                    |
| is not regulated and inspected by  |  |   |                                    | hower (separate)                       |
| the local sanitary district.   | Drinking Fountain  |   |                                    | ink                                    |
| ·  | _  Indirect Wa   |   |                                    | /ash Basin                             |
| HOOK-UP: to an existing subsurface wastewater disposal system  |  | nent Softener, Filter,Etc.  |                                    | /ater Closet (Toilet)<br>lothes Washer |
| wasiewater disposal system   | Grease / Oi  |   |                                    |  |
|  |  | i Separator   |                                    | ish Washer                             |
| PIPING RELOCATION: of sanitary   | Bidet  |   |                                    | arbage Disposal<br>aundry Tub          |
| lines, drains, and piping without new fixtures.  | Other:   |   |                                    | ater Heater                            |
| -  | Fixtures (Sul  | ototal) Column 2  |                                    | ktures (Subtotal) Column 1             |
| OR   |  |   | 11                                 | TOTAL FIXTURES                         |
| TRANSFER FEE [\$10.00]   | First 4 fixtures = \$  | by fixture:<br>10 Over 4 = \$10/fixture   | 40                                 | Fixture Fee                            |
|  | + \$10   | Surcharge   | 10                                 | Transfer Fee                           |
| Places cell 974 9700 til   |  |   |                                    | Hook-Up & Relocation Fee               |
| Please call 874-8703 with your permit # to schedule inspections!   |  |   | \$50                               | PERMIT FEE (TOTAL)                     |