



# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	181 BOLTON STREET
CBL:	186A F005001
PROPERTY OWNER(S) NAME	
OWNER NAME:	JEFF CORBIN
Applicant Name:	RICHARD MARTIN
Mailing Address of Owner/Applicant (if Different)	836 WASHINGTON AVE #7 PORTLAND MAINE 04103
E Mail:	JEFFCORBIN@60.com
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 7/31/17

Town/City	PORTLAND	Permit #	2017-07288
Date Permit Issued	7/30/17	Fee: \$	50 Double Fee Charged [ ]
Local Plumbing Inspector Signature		L.P.I. # 1081	
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.			
<b>Caution: Inspection Required</b>			
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

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING</p> <p>2. <input type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED JUL 31 2017</p> <p>Dept. of Building Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2. <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3. <input checked="" type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4. <input type="checkbox"/> OTHER-SPECIFY _____</p> <p style="text-align: center;"><b>Please call 874-8703 with your permit # to schedule inspections!</b></p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>RICHARD MARTIN</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER</p> <p>2. <input type="checkbox"/> OIL BURNERMAN</p> <p>3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC</p> <p>4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE</p> <p>5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>C071217</u></p>																																																	
	<table border="1"> <thead> <tr> <th>Hook-Up &amp; Piping Relocation Maximum of 1 Hook-Up</th> <th>Column 2 Number Type of Fixture</th> <th>Column 1 Number Type of Fixture</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.</td> <td><input type="checkbox"/> Hosebib/Sillcock</td> <td><input type="checkbox"/> Bathtub (and Shower)</td> </tr> <tr> <td><input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system</td> <td><input type="checkbox"/> Floor Drain</td> <td><input type="checkbox"/> Shower (separate)</td> </tr> <tr> <td><input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.</td> <td><input type="checkbox"/> Urinal</td> <td><input checked="" type="checkbox"/> Sink</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Drinking Fountain</td> <td><input type="checkbox"/> Wash Basin</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Indirect Waste</td> <td><input type="checkbox"/> Water Closet (Toilet)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Water Treatment Softener, Filter, etc.</td> <td><input type="checkbox"/> Clothes Washer</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Grease / Oil Separator</td> <td><input type="checkbox"/> Dish Washer</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Roof Drain</td> <td><input type="checkbox"/> Garbage Disposal</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Bidet</td> <td><input type="checkbox"/> Laundry Tub</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Other: _____</td> <td><input type="checkbox"/> Water Heater</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Fixtures (Subtotal) Column 2</td> <td><input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1</td> </tr> <tr> <td style="text-align: center;">OR</td> <td></td> <td><input checked="" type="checkbox"/> TOTAL FIXTURES</td> </tr> <tr> <td><input type="checkbox"/> TRANSFER FEE \$10.00</td> <td>Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture</td> <td><input type="checkbox"/> Fixture Fee</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Transfer Fee</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Hook-Up &amp; Relocation Fee</td> </tr> <tr> <td colspan="2"><b>Please call 874-8703 with your permit # to schedule inspections!</b></td> <td><b>PERMIT FEE (TOTAL)</b></td> </tr> </tbody> </table>	Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)	<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Urinal	<input checked="" 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"/> 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"/> Bidet	<input type="checkbox"/> Laundry Tub		<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater		<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1	OR		<input checked="" type="checkbox"/> 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	<b>Please call 874-8703 with your permit # to schedule inspections!</b>	
Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Column 2 Number Type of Fixture	Column 1 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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<input type="checkbox"/> Floor Drain	<input type="checkbox"/> Shower (separate)																																																	
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/> Urinal	<input checked="" 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"/> 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"/> Bidet	<input type="checkbox"/> Laundry Tub																																																	
	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Water Heater																																																	
	<input type="checkbox"/> Fixtures (Subtotal) Column 2	<input checked="" type="checkbox"/> Fixtures (Subtotal) Column 1																																																	
OR		<input checked="" type="checkbox"/> 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																																																	
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>PERMIT FEE (TOTAL)</b>																																																	