



# PLUMBING PERMIT APPLICATION

| PROPERTY ADDRESS  |                      |
|---|----------------------|
| Street:   | 41 Caleb St.         |
| CBL:  |                      |
| PROPERTY OWNER(S) NAME  |                      |
| OWNER NAME:   | Joseph Laverniere    |
| Applicant Name:   | Elizabeth Laverniere |
| Mailing Address of Owner/Applicant (if Different)   |                      |
| E Mail:   | jlaverniere33@me.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: 1/12/15        |

Town/City PORTLAND Permit # 2015-00055

Date Permit Issued 01/12/15 Fee: \$ 70.00 Double Fee Charged [ ]

L.P.I. # 360

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

|  |   |  |
|--|---|--|
| <p>This Application is for</p> <p>1 <input type="checkbox"/> NEW PLUMBING</p> <p>2 <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p><b>RECEIVED</b><br/>12<br/>JAN 12 2015<br/>Dept. of Building Inspections<br/>City of Portland Maine</p> | <p>Type of Structure to be Served</p> <p>1 <input checked="" type="checkbox"/> SINGLE FAMILY RESIDENCE</p> <p>2 <input type="checkbox"/> MODULAR OR MOBILE HOME</p> <p>3 <input type="checkbox"/> MULTIPLE FAMILY DWELLING</p> <p>4 <input type="checkbox"/> OTHER-SPECIFY _____</p> <p><b>Please call 874-8703 with your permit # to schedule inspections!</b></p> | <p>Plumbing to be Installed by:</p> <p>NAME: Joseph Laverniere</p> <p>1 <input 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 checked="" type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE #                    </p> |
|--|---|--|

| Hook-Up & Piping Relocation<br>Maximum of 1 Hook-Up  | Column 2   | 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"/> 1   | Hosebib / Sillcock                     |
|  | <input type="checkbox"/> 1   | Floor Drain                            |
|  | <input type="checkbox"/> 1   | Urinal                                 |
|  | <input type="checkbox"/> 1   | Drinking Fountain                      |
|  | <input type="checkbox"/> 1   | Indirect Waste                         |
|  | <input type="checkbox"/> 1   | Water Treatment Softener, Filter, Etc. |
| <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system   | <input type="checkbox"/> 1   | Grease / Oil Separator                 |
|  | <input type="checkbox"/> 1   | Roof Drain                             |
|  | <input type="checkbox"/> 1   | Bidet                                  |
| <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.  | <input type="checkbox"/> 1   | Other: _____                           |
|  | <b>Fixtures (Subtotal) Column 2</b>  |  |
| <b>OR</b>  |  |  |
| <input type="checkbox"/> TRANSFER FEE \$[10.00]  | Fees by fixture:<br>First 4 fixtures = \$40 Over 4 = \$10/fixture + \$10 Surcharge |  |
|  | <input type="checkbox"/> 1   | Bathtub (and Shower)                   |
|  | <input type="checkbox"/> 1   | Shower (separate)                      |
|  | <input checked="" type="checkbox"/> 3  | Sink                                   |
|  | <input type="checkbox"/> 1   | Wash Basin                             |
|  | <input checked="" type="checkbox"/> 1  | Water Closet (Toilet)                  |
|  | <input type="checkbox"/> 1   | Clothes Washer                         |
|  | <input checked="" type="checkbox"/> 1  | Dish Washer                            |
|  | <input type="checkbox"/> 1   | Garbage Disposal                       |
|  | <input type="checkbox"/> 1   | Laundry Tub                            |
|  | <input type="checkbox"/> 1   | Water Heater                           |
|  | <b>Fixtures (Subtotal) Column 1</b>  |  |
|  | <b>TOTAL FIXTURES</b>  |  |
|  | 60.00  | Fixture Fee                            |
|  | 10.00  | Transfer Fee - Surcharge               |
|  |  | Hook-Up & Relocation Fee               |
| <b>Please call 874-8703 with your permit # to schedule inspections!</b>  |  | <b>70.00 PERMIT FEE (TOTAL)</b>        |

**CITY OF PORTLAND**  
**DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**  
 389 Congress Street  
 Portland, Maine 04101

**PLUMBING PERMIT RECEIPT**

|                            |                           |
|----------------------------|---------------------------|
| Application No: 2015-00055 | Applicant: LAVERRIERE JOE |
| Project Desc:              | Location: 41 CALEB ST     |
| CBL: 187 A010001           | Plumber:                  |
| Invoice Date: 01/12/2015   | License #:                |

|                     |   |                     |   |                 |   |                    |   |              |                     |
|---------------------|---|---------------------|---|-----------------|---|--------------------|---|--------------|---------------------|
| Previous<br>Balance | - | Payment<br>Received | + | Current<br>Fees | - | Current<br>Payment | = | Total<br>Due | Payment<br>Due Date |
| \$0.00              |   | \$0.00              |   | \$70.00         |   | \$70.00            |   | \$0.00       | On Receipt          |

**Previous Balance** **\$0.00**

| Fee Description       | Qty | Fee     |
|-----------------------|-----|---------|
| Bathtub (and Shower)  | 1   | \$10.00 |
| Sink                  | 3   | \$30.00 |
| Water Closet (Toilet) | 1   | \$10.00 |
| Dish Washer           | 1   | \$10.00 |
| Surcharge             | 1   | \$10.00 |
| Water Closet (Toilet) | 1   | \$10.00 |
| Sink                  | 3   | \$30.00 |
| Dish Washer           | 1   | \$10.00 |
| Bidet                 | 1   | \$10.00 |
|                       |     | \$70.00 |

**Total Current Payments:** - **\$70.00**

**Minimum Amount Due Now:** - **\$0.00**

**CBL:** 187 A010001      **Application No:** 2015-00055  
**Bill to:** LAVERRIERE JOE  
 41 CALEB ST  
 PORTLAND, ME 04102

**Invoice Date:** 01/12/2015  
**Invoice No:** 47738  
**Total Amt Due:** \$0.00  
**Payment Amount:** \$70.00