



# PLUMBING PERMIT APPLICATION

## PROPERTY ADDRESS

Street: 76 POWERSLAND STREET

CBL: 190 H023 001

## PROPERTY OWNER(S) NAME

OWNER NAME: SMZTU, PETER

Applicant Name: All Aspects Plumbing, #H023001

Mailing Address of Owner/Applicant (if Different)

E Mail: PETER.SERAFIN@YAHOO.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] Date: 2/13/18

Town/City PORTLAND Permit # 2018-07059

Date Permit Issued 2/13/18 Fee: \$ \_\_\_\_\_ 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.

[Signature] Date Approved 2-13-2018  
LPI Signature Date Approved (Final)

## PERMIT INFORMATION

This Application is for

1.  NEW PLUMBING

2.  RELOCATED PLUMBING

RECEIVED

FEB 13 2018

Permitting & 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: PETER SERAFIN

1.  MASTER PLUMBER

2.  OIL BURNERMAN

3.  MFG'D HOUSING DEALER / MECHANIC

4.  PUBLIC UTILITY EMPLOYEE

5.  PROPERTY OWNER

LICENSE # M500 091143

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