



PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS
 Street: 947 Westbrook St
 CBL: 199 A001 002

PROPERTY OWNER(S) NAME
 OWNER NAME: Great American Bagel
 Applicant Name: Derek Locke
 Mailing Address of Owner/Applicant (if Different): 26 High Point Rd Scarborough ME 04074
 E Mail: Casco Bay Plumbing@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.
DLK LL 10/16/17
 Signature of Owner/Applicant Date

Town/City **PORTLAND** Permit # 2017-07388
 Date Permit Issued 10/16/17 Fee: \$ 50.00 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.
 _____ 10-16-2017
 LPI Signature Date Approved (Final)

PERMIT INFORMATION

<p>This Application is for</p> <p>1. <input type="checkbox"/> NEW PLUMBING 2. <input checked="" type="checkbox"/> RELOCATED PLUMBING</p> <p style="text-align: center;">RECEIVED <u>OCT 16 2017</u> Permitting & Inspections City of Portland Maine</p>	<p>Type of Structure to be Served</p> <p>1. <input type="checkbox"/> SINGLE FAMILY RESIDENCE 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input checked="" type="checkbox"/> OTHER-SPECIFY <u>Restaurant</u></p> <p style="text-align: center;">Please call 874-8703 with your permit # to schedule inspections!</p>	<p>Plumbing to be Installed by:</p> <p>NAME: <u>Derek Locke</u></p> <p>1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> OIL BURNERMAN 3. <input type="checkbox"/> MFG'D HOUSING DEALER / MECHANIC 4. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 5. <input type="checkbox"/> PROPERTY OWNER</p> <p>LICENSE # <u>MS9010134016</u></p>
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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 / Sillcock	<input type="checkbox"/>	Bathtub (and Shower)	
	<input type="checkbox"/>	Floor Drain	<input type="checkbox"/>	Shower (separate)	
	<input type="checkbox"/>	Urinal	<u>04</u>	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"/> HOOK-UP: to an existing subsurface wastewater disposal system	<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"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	Water Heater	
	<u>10</u>	Fixtures (Subtotal) Column 2	<u>04</u>	Fixtures (Subtotal) Column 1	
OR			<input 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		<u>40</u>	Fixture Fee	
			<u>10</u>	Transfer Fee	
				<input type="checkbox"/>	Hook-Up & Relocation Fee
Please call 874-8703 with your permit # to schedule inspections!		<u>50.00</u>	PERMIT FEE (TOTAL)		

BP # 2017-00449