



# PLUMBING PERMIT APPLICATION

PROPERTY ADDRESS	
Street:	1945 Congress Street
CBL:	Dr. Bedec's Office 216 Acad6 001
PROPERTY OWNER(S) NAME	
OWNER NAME:	Diversified Partners, LLC
Applicant Name:	Ranor, Inc.
Mailing Address of Owner/Applicant (if Different)	962 Main St., Jay, ME 04239
E Mail:	pauline@ranormech.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
<i>Pauline M. Boivin</i>	07/11/17

Town/City	PORTLAND	Permit #	2017-07261
Date Permit Issued	7/12/17	Fee:	\$720.00 Double Fee Charged <input type="checkbox"/>
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.

**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: *[Signature]* Date Approved (Final): 7-13-2017

## PERMIT INFORMATION

<b>This Application is for</b> 1. <input checked="" type="checkbox"/> NEW PLUMBING 2. <input type="checkbox"/> RELOCATED PLUMBING  RECEIVED JUL 11 2017 Permitting & Inspections City of Portland Maine	<b>Type of Structure to be Served</b> 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>Medical Office</u>  <b>Please call 874-8703 with your permit # to schedule inspections!</b>	<b>Plumbing to be Installed by:</b> NAME: <u>Aaron St. Pierre</u> 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  LICENSE # <u>14273</u>
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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.	4   Hosebib / Sillcock	1   Bathtub (and Shower)
<input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system	5   Floor Drain	2   Shower (separate)
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	1   Urinal	36   Sink
	1   Drinking Fountain	3   Wash Basin
	1   Indirect Waste	10   Water Closet (Toilet)
	1   Water Treatment Softener, Filter, Etc.	2   Clothes Washer
	1   Grease / Oil Separator	1   Dish Washer
	6   Roof Drain	1   Garbage Disposal
	1   Bidet	1   Laundry Tub
	1   Other: _____	3   Water Heater
	<b>18   Fixtures (Subtotal) Column 2</b>	<b>56   Fixtures (Subtotal) Column 1</b>
<b>OR</b>		<b>71   TOTAL FIXTURES</b>
<input type="checkbox"/> TRANSFER FEE \$10.00	Fees: \$10 Surcharge + First 4 fixtures = \$50 Minimum Over 4 = \$10 Surcharge + \$10/fixture	1700.00 Fixture Fee 160.00 Transfer Fee Surcharge
		Hook-Up & Relocation Fee
<b>Please call 874-8703 with your permit # to schedule inspections!</b>		<b>720.00 PERMIT FEE (TOTAL)</b>

BP 2017-00952